Level II Fieldwork Student Manual

(September 2018)

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Academic Fieldwork Coordinator
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9/2018
Goals and Standards of Fieldwork Education
Introduction

Welcome to Level II Fieldwork! This handbook is meant to orient you to policies and guidelines related to the requirements for fieldwork (FW) education at the LSUHSC-NO Master of Occupational Therapy Program. The Academic Fieldwork Coordinator is available to further clarify any information included in this handbook.

The program provides opportunities for students to develop necessary skills and abilities expected for entry-level proficiency in occupational therapy. There is a strong emphasis on encouraging clinical reasoning and critical thinking in working with clients of all ages, cultures, and disability status. The LSUSHC-NO Master of Occupational Therapy Program is committed to preparing practitioners who can successfully fulfill the responsibilities of assuming the professional role in an ever-changing healthcare environment.

Please review this manual prior to beginning your FW II to become familiar with your responsibilities during this phase of your education.

Dates for 2018 /2019 Fieldwork

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<tr>
<th></th>
<th>Level 1</th>
<th>Level II</th>
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</thead>
<tbody>
<tr>
<td>MOT Class of 2019</td>
<td>Oct. 8 – 12, 2018</td>
<td>Jan. 7 – March 29, 2019</td>
</tr>
<tr>
<td>MOT Class of 2020</td>
<td>Oct. 8 – 12, 2018</td>
<td>March 11 –15, 2019</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oct. 7-11, 2019</td>
</tr>
<tr>
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<td>May 6 – July 26, 2019</td>
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Value and Purpose of Fieldwork Education

Fieldwork assignments constitute an integral part of the occupational therapy and occupational therapy assistant education curricula. Through fieldwork, students learn to apply theoretical and scientific principles learned from their academic programs to address actual client needs within the context of authentic practice environments. While on fieldwork, each student develops competency to ascertain client occupational performance needs to identify supports or barriers affecting health and participation and document interventions provided. Fieldwork also provides opportunities for the student to develop advocacy, leadership, and managerial skills in a variety of practice settings. Finally, the student develops a professional identity as an occupational therapy practitioner, aligning his or her professional judgments and decisions with the American Occupational Therapy Association (AOTA) Standards of Practice (AOTA, 2005b) and the Occupational Therapy Code of Ethics (AOTA, 2005a).

AOTA Goal of Clinical Education

“The goal of Level II Fieldwork is to develop competent, entry-level, generalist occupational therapists and occupational therapy assistants” (AOTA, 2012).
USEFUL CONTACT INFORMATION

Department of Occupational Therapy
1900 Gravier St., 8th Floor  
New Orleans, LA 70112  
504-568-4302  
Fax: 504-568-4306  
http://alliedhealth.lsuhsc.edu/ot/default.aspx

Student Health Services
2020 Gravier St., 7th Floor  
New Orleans, LA 70112  
504-525-4839  
Fax: 866-814-9706  
http://www.lsuhsc.edu/orgs/studenthealth/

Academic Fieldwork Coordinator  
Ingrid Franc, PhD, LOTR  
1900 Gravier St., 8th Floor  
New Orleans, LA 70112  
504-568-4304  
C: 504-613-8267  
Ifan1@lsuhsc.edu

Student Affairs
1900 Gravier St., 6th Floor  
New Orleans, LA 70112  
504-568-4254  
http://alliedhealth.lsuhsc.edu/Admin/StudentAffairs.aspx

University Police  
24 Hour/Emergencies  
504-568-8999

Registrar  
433 Bolivar St.  
New Orleans, LA 70112  
504-568-4829  
http://www.lsuhsc.edu/no/students/

Financial Aid  
433 Bolivar Street, Room 215  
New Orleans, LA 70112-2223  
504-568-4820  
http://www.lsuhsc.edu/no/students/FinancialAid/

PROFESSIONAL ORGNIZATIONS
American Occupational Therapy Association (AOTA)  
4720 Montgomery Lane, Suite 200  
Bethesda, MD 20814-3449  
301-652-2686  
http://aota.org/

REGULATORY AGENCIES
Louisiana State Board of Medical Examiners (LSBME)  
630 Camp St.  
New Orleans, LA 70130  
504-524-6823  
http://www.lsme.louisiana.gov/

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Ingrid Franc, PhD, LOTR  
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http://www.lsme.louisiana.gov/
Overview and Course Requirements for Level II Fieldwork

In accordance with the ACOTE Standards (2011), each MOT student must successfully complete two, 12-week, Level II fieldwork experiences in order to complete the requirements for graduation from the LSUHSC Program in Occupational Therapy. The first Level II experience is completed in the Summer II semester, earns 6 credit hours, and is referred to as Fieldwork Level IIA; the course number is OCCT 6670. The second Level II experience is completed in the Spring III semester, earns 8 credit hours, and is referred to as Fieldwork Level IIB; the course number is OCCT 6770. Fieldwork Level IIA can be completed in any adult client setting. Fieldwork Level IIB can be completed in an adult or pediatric setting. For all settings, LSUHSC-N.O. must have an active contract or affiliation agreement with the site.

OCCT 6670 and 6770 Fieldwork II
COURSE DESCRIPTION: (6-8 cr.) An in-depth experience in delivering occupational therapy services to clients. Students are supervised in a fieldwork setting full-time (40 hours per week) for two 12-week rotations. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies, as long as it is at least 50% of an FTE at that site. Students will register for each Level II placement. Each Fieldwork II experience is 12 weeks or 3 months (full-time).

Prerequisites for Fieldwork Coursework
Prior to a student beginning Level IIA fieldwork, successful completion of the LSUHSC-MOT program of study through the Spring II semester, and consent are required. Pediatric settings are not allowed for Level IIA fieldwork, as the pediatric course content has not yet been completed. Prior to a student beginning Level IIB fieldwork, successful completion of the LSUHSC-MOT program of study through the Fall II semester, and successful completion of the Level IIA fieldwork are required. LSUHSC-MOT students will not be able to progress with fieldwork if there are outstanding unsuccessful or incomplete grades, or if there are blocks on a student’s record.

Fieldwork Placement
The fieldwork placement selection process is a combination of the students’ preferences, a computer software generated lottery, and the students’ faculty advisor and fieldwork coordinator input. See page 23, Procedures for Selecting Fieldwork Level II Placements.

The student should expect that at least one of these experiences will be out of town. An ‘in town’ location is defined as the following parishes: Orleans, Jefferson, St. Tammany, Plaquemines, St. Bernard, St. Charles, St. James, and St. John.
## Student Requirements to Participate in Fieldwork

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Activity</th>
<th>Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personal Health and Accident Insurance</strong></td>
<td>Student obtains insurance through student health service or other insurance carrier. Student keeps department updated on any changes to insurance.</td>
<td>Provide department with insurance number at the start of the program. Provide the department with written notice of any changes to the insurance agency or policy number.</td>
</tr>
<tr>
<td><strong>Immunization Record</strong></td>
<td>Student obtains this prior to admission to the program. All records are recorded in Student Health.</td>
<td>A copy of the updated immunization is provided to the department by the student prior to fieldwork.</td>
</tr>
<tr>
<td><strong>Tuberculosis Test</strong></td>
<td>Student is responsible for having TB test performed every 12 months. This can be done at student health service or other medical site.</td>
<td>Copies of the record of TB test results and dates are provided by the student to the department.</td>
</tr>
<tr>
<td><strong>CPR</strong></td>
<td>Students must maintain current CPR certification through the Sources: American Heart Association (*healthcare provider required).</td>
<td>Copies of the record of CPR results and dates are provided by the student to the department.</td>
</tr>
<tr>
<td><strong>Drug Testing</strong></td>
<td>Student must obtain Drug Screen through Tulane Drug Analysis Laboratory. Cost $25.</td>
<td>Student will upload proof of having completed the drug screen to CORE.</td>
</tr>
<tr>
<td><strong>OSHA Training &amp; Bloodborne Pathogens Training</strong></td>
<td>Student will complete OSHA and Bloodborne Pathogens Training.</td>
<td>Student will complete all compliance training required by the university.</td>
</tr>
<tr>
<td><strong>Criminal Background Check</strong></td>
<td>Students will obtain a criminal background check through Certiphi. A link will be provided to complete this. Cost $82.</td>
<td>Dean’s list of completed and missing background checks is provided to the AFWC.</td>
</tr>
<tr>
<td><strong>Liability Insurance</strong></td>
<td>Each student is responsible for acquiring professional liability insurance prior to fieldwork experience ($1,000,000/$3,000,000).</td>
<td>Student is required to provide copy of professional liability coverage to the department.</td>
</tr>
<tr>
<td><strong>HIPAA Training</strong></td>
<td>Each student is required to have completed the on-line HIPAA training course provided through the Office of Compliance</td>
<td>Student will complete recommended compliance training as required.</td>
</tr>
<tr>
<td><strong>Signed Student Responsibility Agreement</strong></td>
<td>Student will be provided with hard copy of form for signature.</td>
<td>Form must be signed and returned to AFWC prior to placement in first FW setting (Level I or II).</td>
</tr>
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OCCT 6670, OCCT 6770 Syllabus

OCCUPATIONAL THERAPY FIELDWORK IIA & IIB

COURSE ADMINISTRATOR: Ingrid Franc, PhD, LOTR

OCCT 6670, Fieldwork IIA; 6 credit hours; Summer II semester
OCCT 6770, Fieldwork IIB; 8 credit hours; Spring III semester

COURSE DESCRIPTION: An in-depth experience in delivering occupational therapy services to clients. Students are supervised in a fieldwork setting full-time (40 hours per week) for two 12-week rotations. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies, as long as it is at least 50% of an FTE at that site.

TEXT: References and readings are as assigned by Fieldwork site and/or Fieldwork Educator.

COURSE POLICIES:

1. You are expected to check your e-mail DAILY (this is a school-wide policy). Important announcements, schedule modifications, and supplemental course information may be e-mailed to you by the course instructor.
2. Daily attendance is mandatory. Any missed days must be made up. Any absences must be reported directly to the FWE, and also reported (same day) to the AFWC on CORE.

COURSE ASSIGNMENTS:

<table>
<thead>
<tr>
<th>Correspondence/Assignment</th>
<th>ACOTE Standards</th>
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<tr>
<td>AOTA Fieldwork Data Form</td>
<td>C.1.2; C.1.4; C.1.12; C.1.14</td>
</tr>
<tr>
<td>Go over AOTA data form with your direct supervisor. It is your responsibility to create or update an electronic form in Word format OR directly on CORE, for your site. You may interview your supervisor for information, but do not ask him/her to fill it out. Ensure that all questions are completed, and that your site has an electronic (Word) copy. Either complete the form directly on CORE or submit the electronic copy in Word format on CORE. (Do not submit a handwritten copy or pdf copy)</td>
<td></td>
</tr>
<tr>
<td>Week 3 Level II Fieldwork Update</td>
<td>C.1.3; C.1.18</td>
</tr>
<tr>
<td>• Submit your Update to CORE</td>
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<tr>
<td>• Follow-up with your FWE to ensure he/she has submitted it to CORE; if your FWE is not using CORE, fax it to 504-568-4306 or scan and email it to the AFWC</td>
<td></td>
</tr>
<tr>
<td>Midterm Evaluation (FWPE)</td>
<td>C.1.3; C.1.18</td>
</tr>
<tr>
<td>• Follow-up with your FWE to ensure he/she has submitted it to CORE; see above if not using CORE</td>
<td></td>
</tr>
<tr>
<td>Final Evaluation (FWPE)</td>
<td>C.1.3; C.1.18</td>
</tr>
<tr>
<td>• Follow-up with your FWE to ensure he/she has submitted it to CORE; see above if not using CORE</td>
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</table>
• After the FWPE has been submitted: sign in to CORE, find the evaluation, and check off the I have read this report box.

Student Evaluation of the Fieldwork Experience (SEFWE)
• Complete on CORE (preferred) OR:
• Turn in hard copy to AFWC by hand after Summer FW II (OCCT 6670)
• Turn in by fax to 504-568-4306 or scan/email to AFWC after Spring FW II (OCCT 6770)

| EVALUATION | Student performance will be evaluated by the Fieldwork Educator (FWE) using the Fieldwork Performance Evaluation of the Occupational Therapist (FWPE). The FWE completes the FWPE on the CORE ELMS system (preferred), or mails the original, to the Academic Fieldwork Coordinator (AFWC) no later than one week after the student has completed the experience. A copy of the evaluation is included in Appendix B. The student completes the Student Evaluation for the Fieldwork Experience (SEFWE) on the CORE ELMS system (preferred), or mails the original to the AFWC no later than one week after the student has completed the experience. A copy of the evaluation is included in Appendix C. COURSE GRADING: A grade of Satisfactory/Unsatisfactory will be recorded by the Academic Fieldwork Coordinator. 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. An overall final score must be 122 points and above to receive a passing grade. The student must complete the required Course Correspondence/Assignments. Student who earns a grade of Unsatisfactory or Failing a clinical fieldwork will be placed on scholastic probation, and must repeat the fieldwork. A course, including those designated clinical fieldwork (OCCT 6670 and OCCT 6770), may be repeated one time only. Students who repeat a course but earn an unacceptable grade will be dismissed from the school. JUSTIFICATION: 2011 STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM FOR THE OCCUPATIONAL THERAPIST, Effective July 31, 2013 by the ACCREDITATION COUNCIL FOR OCCUPATIONAL THERAPY EDUCATION (ACOTE), AOTA, Inc. COURSE OBJECTIVES: Fieldwork provides the student with the opportunity to integrate academic knowledge with the application of skills at higher levels of performance and responsibility. Upon completion of Level II fieldwork experiences the students will:

1. Demonstrate an understanding of the basic tenets of occupational therapy.
2. Effectively identify appropriate methods to assess relevant areas.
3. Accurately administer and interpret assessment findings.
4. Demonstrate adaptability in administering assessment tools when usual procedures are not practical. | C.1.2; C.1.4; C.1.15; |
5. Incorporate information obtained through collaboration with clients, family/caregivers, and significant others to develop patient goals and intervention strategies.
6. Effectively communicate and instruct clients, family/caregivers and significant others on activities which support the treatment plan/interventions.
7. Establish and maintain a therapeutic relationship with clients.
8. Utilize the roles modeled by occupational therapy practitioners in direct service to clients.
9. Consistently develop self-evaluation, problem solving and critical thinking skills.
10. Practice interpersonal skills and attitudes necessary for effective interaction with persons having physical, psychosocial, or developmental deficits; people with different values and backgrounds; and with other members of the health care team.
11. Actively participate in the supervisory relationship and use feedback for positive growth and change.
12. Identify professional values and beliefs related to ethical decision making as outlined in the Occupational Therapy Code of Ethics.

**BEHAVIORAL OBJECTIVES:** Behavioral objectives are developed by the Fieldwork Site in collaboration with the Academic Fieldwork Coordinator. The Fieldwork Site provides one copy of these objectives to the student. An additional copy is sent to the Academic Fieldwork Coordinator who is responsible for maintaining student fieldwork files.

**TEACHING/LEARNING EXPERIENCES:** 12 Week Fieldwork Practicum; this may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies, as long as it is at least 50% of an FTE at that site.
Level II Fieldwork Objectives

Fieldwork provides the student with the opportunity to integrate academic knowledge with the application of skills at higher levels of performance and responsibility. Upon completion of Level II fieldwork experiences students will:

1. Demonstrate an understanding of the basic tenets of occupational therapy.
2. Display behaviors indicative of reflective, empathetic, and ethical practitioners.
3. Demonstrate cultural competence.
4. Demonstrate an understanding of the theoretical bases of occupational therapy.
5. Apply theoretical constructs to practice.
6. Utilize clinical/professional reasoning throughout the occupational therapy process.
7. Demonstrate an understanding of the process of screening and evaluation.
8. Build a knowledge base of varied screening and evaluation tools.
9. Select appropriate assessment tools based on their psychometric properties and on characteristics of person and context.
10. Appropriately administer selected assessments and use occupations for assessment purposes.
11. Interpret and apply evaluation findings appropriately.
12. Develop an understanding of the process of intervention.
15. Collaborate with clients, caregivers, and other professionals to create intervention plans.
16. Demonstrate an ability to use a variety of teaching/learning techniques, with clients, other health care providers, and the public.
17. Communicate and document effectively through written, verbal, and nonverbal means.
18. Exhibit the ability to appropriately adapt occupations and the environment.
19. Know when to refer clients to other health professionals within and outside the profession.
20. Demonstrate accountability for reimbursement of services.
21. Possess individual and group interaction skills for use with clients, other health care providers, and the public.
22. Monitor, reassess, and modify interventions as needs of client changes.
23. Discharge clients using appropriate procedures.
24. Demonstrate an understanding of various contexts in which occupational therapy services are provided.
25. Apply principles of management and systems to the provision of occupational therapy services.
26. Understand implications of State and Federal legislation in the delivery of occupational therapy services and credentialing of occupational therapy personnel.
27. Maintain records required of various practice settings.
28. Advocate for the profession and the consumer.
29. Demonstrate an understanding of reimbursement policies and procedures and their effects on clients.
30. Exhibit professional work behaviors, i.e., proper maintenance of practice environments, time management, respectful treatment of others.
31. Understand the supervisory process of occupational therapy and non-occupational therapy personnel.
32. Acknowledge the ongoing professional responsibility for providing fieldwork education and supervision.
33. Understand the importance of working collaboratively with other occupational therapy personnel, and other service providers.
34. Demonstrate the ability to work collaboratively with clients, their caregivers, and other service providers.
35. Develop an ability to understand and apply research findings to practice.
36. Appropriately use professional literature to make practice decisions; display evidence-based practice skills.
37. Understand and appreciate the ethics and values of the profession.
<table>
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<th>C.1.0.</th>
<th>FIELDWORK EDUCATION</th>
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<tr>
<td><strong>FIELDWORK EDUCATION</strong></td>
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<tr>
<td>Fieldwork education is a crucial part of professional preparation and is best integrated as a component of the curriculum design. Fieldwork experiences should be implemented and evaluated for their effectiveness by the educational institution. The experience should provide the student with the opportunity to carry out professional responsibilities under supervision of a qualified occupational therapy practitioner serving as a role model. The academic fieldwork coordinator is responsible for the program’s compliance with fieldwork education requirements. The academic fieldwork coordinator will</td>
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| C.1.1. | **Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design in collaboration with faculty so that fieldwork experiences strengthen the ties between didactic and fieldwork education.** |

| C.1.2. | **Document the criteria and process for selecting fieldwork sites, to include maintaining memoranda of understanding, complying with all site requirements, maintaining site objectives and site data, and communicating this information to students.** |

| C.1.3. | **Demonstrate that academic and fieldwork educators collaborate in establishing fieldwork objectives and communicate with the student and fieldwork educator about progress and performance during fieldwork.** |

| C.1.4. | **Ensure that the ratio of fieldwork educators to students enables proper supervision and the ability to provide frequent assessment of student progress in achieving stated fieldwork objectives.** |

| C.1.5. | **Ensure that fieldwork agreements are sufficient in scope and number to allow completion of graduation requirements in a timely manner in accordance with the policy adopted by the program as required by Standard A.4.14.** |

| C.1.6. | **The program must have evidence of valid memoranda of understanding in effect and signed by both parties at the time the student is completing the Level I or Level II fieldwork experience. (Electronic memoranda of understanding and signatures are acceptable.) Responsibilities of the sponsoring institution(s) and each fieldwork site must be clearly documented in the memorandum of understanding.** |

| C.1.7. | **Ensure that at least one fieldwork experience (either Level I or Level II) has as its focus psychological and social factors that influence engagement in occupation.** |

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

| C.1.11. | **Ensure that the fieldwork experience is designed to promote clinical reasoning and reflective practice, to transmit the values and beliefs that enable ethical practice, and to develop professionalism and competence in career responsibilities.** |
| C.1.12. | Provide Level II fieldwork in traditional and/or emerging settings, consistent with the curriculum design. In all settings, psychosocial factors influencing engagement in occupation must be understood and integrated for the development of client-centered, meaningful, occupation-based outcomes. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings. |
| C.1.13. | Require a minimum of 24 weeks’ full-time Level II fieldwork. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s usual and customary personnel policies, as long as it is at least 50% of an FTE at that site. |
| C.1.14. | Ensure that the student is supervised by a currently licensed or otherwise regulated occupational therapist who has a minimum of 1 year full-time (or its equivalent) of practice experience subsequent to initial certification and who is adequately prepared to serve as a fieldwork educator. The supervising therapist may be engaged by the fieldwork site or by the educational program. |
| C.1.15. | Document a mechanism for evaluating the effectiveness of supervision (e.g., student evaluation of fieldwork) and for providing resources for enhancing supervision (e.g., materials on supervisory skills, continuing education opportunities, articles on theory and practice). |
| C.1.16. | Ensure that supervision provides protection of consumers and opportunities for appropriate role modeling of occupational therapy practice. Initially, supervision should be direct and then decrease to less direct supervision as appropriate for the setting, the severity of the client's condition, and the ability of the student. |
| C.1.17. | Ensure that supervision provided in a setting where no occupational therapy services exist includes a documented plan for provision of occupational therapy services and supervision by a currently licensed or otherwise regulated occupational therapist with at least 3 years’ full-time or its equivalent of professional experience. Supervision must include a minimum of 8 hours of direct supervision each week of the fieldwork experience. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off site. |
| C.1.18. | Document mechanisms for requiring formal evaluation of student performance on Level II fieldwork (e.g., the AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student or equivalent). |
| C.1.19. | Ensure that students attending Level II fieldwork outside the United States are supervised by an occupational therapist who graduated from a program approved by the World Federation of Occupational Therapists and has 1 year of experience in practice. |
Supervision Requirements for Level II Fieldwork

Fieldwork Level II and Occupational Therapy Students: A Position Paper (2012)

The purpose of this paper is to define the Level II fieldwork experience and to clarify the appropriate conditions and principles that must exist to ensure that interventions completed by Level II fieldwork students are of the quality and sophistication necessary to be clinically beneficial to the client. When appropriately supervised, adhering to professional and practice principles, and in conjunction with other regulatory and payer requirements, the American Occupational Therapy Association (AOTA) considers that students at this level of education are providing occupational therapy interventions that are skilled according to their professional education level of practice.

AOTA asserts that Level II occupational therapy fieldwork students may provide occupational therapy services under the supervision of a qualified occupational therapist in compliance with state and federal regulations. Occupational therapy assistant fieldwork students may provide occupational therapy services under the supervision of a qualified occupational therapist or occupational therapy assistant under the supervision of an occupational therapist in compliance with state and federal regulations.

Occupational therapy Level II fieldwork students are those individuals who are currently enrolled in an occupational therapy or occupational therapy assistant program accredited, approved, or pending accreditation by the Accreditation Council for Occupational Therapy Education (ACOTE; 2012a, 2012b, 2012c). At this point in their professional education, students have completed necessary and relevant didactic coursework that has prepared them for the field experience.

The fieldwork Level II experience is an integral and crucial part of the overall educational experience that allows the student an opportunity to apply theory and techniques acquired through the classroom and Level I fieldwork learning. Level II fieldwork provides an in-depth experience in delivering occupational therapy services to clients, focusing on the application of evidence based purposeful and meaningful occupations, administration, and management of occupational therapy services. The experience provides the student with the opportunity to carry out professional responsibilities under supervision and to observe professional role models in the field (ACOTE, 2012a, 2012b, 2012c).

The academic program and the supervising OT practitioner are responsible for ensuring that the type and amount of supervision meets the needs of the student and ensures the safety of all stakeholders. The following General Principles represent the minimum criteria that must be present during a Level II fieldwork experience to ensure the quality of services being provided by the Level II student practitioner.
a. The student is supervised by a currently licensed or credentialed occupational therapy practitioner who has a minimum of 1 year of practice experience subsequent to initial certification and is adequately prepared to serve as a fieldwork educator.

When the term occupational therapy practitioner is used in this document, it refers to both occupational therapists and occupational therapy assistants (AOTA, 2006).

b. Occupational therapy students will be supervised by an occupational therapist. Occupational therapy assistant students will be supervised by an occupational therapist or an occupational therapy assistant in partnership with the occupational therapist who is supervising the occupational therapy assistant (AOTA, 2009).

c. Occupational therapy services provided by students under the supervision of a qualified practitioner will be billed as services provided by the supervising licensed occupational therapy practitioner.

d. Supervision of occupational therapy and occupational therapy assistant students in fieldwork Level II settings will be of the quality and scope to ensure protection of consumers and provide opportunities for appropriate role modeling of occupational therapy practice.

e. The supervising occupational therapist and/or occupational therapy assistant must recognize when direct versus indirect supervision is needed and ensure that supervision supports the student’s current and developing levels of competence with the occupational therapy process.

f. Supervision should initially be direct and in line of sight and gradually decrease to less direct supervision as is appropriate depending on the
• Competence and confidence of the student,
• Complexity of client needs,
• Number and diversity of clients,
• Role of occupational therapy and related services,
• Type of practice setting,
• Requirements of the practice setting, and
• Other regulatory requirements. (ACOTE, 2012a, 2012b, 2012c)

g. In all cases, the occupational therapist assumes ultimate responsibility for all aspects of occupational therapy service delivery and is accountable for the safety and effectiveness of the occupational therapy service delivery process involving the student. This also includes provision of services provided by an occupational therapy assistant student under the supervision of an occupational therapy assistant (AOTA, 2009).

h. In settings where occupational therapy practitioners are not employed,
1. Students should be supervised daily on site by another professional familiar with the role of occupational therapy in collaboration with an occupational therapy practitioner (see b above).

2. Occupational therapy practitioners must provide direct supervision for a minimum of 8 hours per week and be available through a variety of other contact measures throughout the workday. The occupational therapist or occupational therapy assistant (under the supervision of an occupational therapist) must have three years of practice experience to provide this type of supervision (ACOTE, 2012a, 2012b, 2012c).

i. All state licensure policies and regulations regarding student supervision will be followed including the ability of the occupational therapy assistant to serve as fieldwork educator.

j. Student supervision and reimbursement policies and regulations set forth by third-party payers will be followed.

It is the professional and ethical responsibility of occupational therapy practitioners to be knowledgeable of and adhere to applicable state and federal laws, and payer rules and regulations related to fieldwork education.

References


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Adopted by the Representative Assembly Coordinating Council (RACC) for the Representative Assembly, 2012 in response to RA Charge # 2011AprC26.
Note. This document is based on a 2010 Practice Advisory, “Services Provided by Students in Fieldwork Level II Settings.” Prepared by a Commission on Practice and Commission on Education Joint Task Force:
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Preparing for Fieldwork Level II Placement
Getting Started with CORE

Account Registration

- Expect an account activation email with your initial username and password from no-reply@corehighered.com
  - You may want to add this email to your trusted email sources
  - Check your spam folder to ensure that this email was not flagged as spam
- Login: https://www.corehighered.com/login-elms.php
- Once you have logged in you may edit your username, password and contact information by clicking on Account Information.

The Messaging Center

- Read any messages that have been sent to you from your Administrator in the Messaging Center.
Go through all documents and videos uploaded into your Document Library.
## Fieldwork Preparation Checklist and Guide

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<tr>
<th>Date</th>
<th>Item</th>
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<tbody>
<tr>
<td></td>
<td>Read entire <em>Student Fieldwork Manual</em></td>
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<td></td>
<td>Sign <em>Student Responsibility Agreement</em> and return to Dr. Franc</td>
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<tr>
<td></td>
<td>Review FW site information in office files/CORE</td>
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<tr>
<td></td>
<td>Complete <em>Request for Fieldwork</em> form by due date</td>
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<td></td>
<td>Schedule an appointment with your faculty advisor and obtain advisor signature on your <em>Request for Fieldwork</em> form</td>
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<td>Turn <em>Request for Fieldwork</em> form with Advisor signature in to Academic Fieldwork Coordinator by the due date</td>
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<td></td>
<td>Sign <em>Fieldwork Agreement</em> form after placement is confirmed and return to Dr. Franc; (form will be placed in your mailbox)</td>
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<td>Complete all assigned compliance education modules, including OSHA Compliance for HIPPA and Bloodborne Pathogens</td>
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<td>Complete Hepatitis B vaccine series and a titer showing immunity; send to Student Health</td>
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<td>Check CPR expiration date; enroll in CPR certification class if it will expire during fieldwork</td>
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<td>Upload current CPR certification to CORE</td>
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<td>Upload current PPD (TB skin test) results to CORE</td>
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<td>Upload copy of Immunization Record (including Hepatitis B vaccine and titer showing immunity) to CORE. Immunization records can be obtained through PeopleSoft.</td>
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<td>Upload personal medical insurance card to CORE</td>
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<td></td>
<td>Upload flu shot record to CORE (must be updated each season)</td>
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<td>Purchase liability insurance from <a href="http://www.proliability.com">www.proliability.com</a> ($1,000,000/$3,000,000 amount). Click on <em>Healthcare Professionals</em> and then <em>Students (Individual)</em>; $35.00 per student for one year policy; purchase in early April to last for both FW IIs. Upload to CORE</td>
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<td>Upload physical exam signed by physician, if required by your site</td>
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<td></td>
<td>Upload proof that drug screen was completed to CORE. Drug screen can be obtained at Tulane Drug Analysis Lab at approx. $25.00. Obtain the <em>Drug Authorization Form</em> from Dr. Franc prior to going. Let them know you are from the School of Allied Health (OT Dept). 1340 Poydras Ste. 2040, N.O. 70112; 504-333-6163.</td>
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<td>Upload proof that criminal background check was completed to CORE. A link will be emailed to you for completion of this requirement.</td>
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<td>Complete the <em>Personal Data Sheet</em> and submit for review to your Faculty Advisor by due date</td>
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<td></td>
<td>Send <em>Letter of Intent to Affiliate</em> to fieldwork site 4-6 weeks prior to start date (sample in FW II Manual) and attach your completed <em>Personal Data Sheet</em></td>
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<td>Learn dress code for your site and obtain appropriate attire</td>
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<td>Send follow-up email to your site in the week prior to start date. Ensure you know when to report, where to report, and who to call if there is an issue.</td>
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<td>At end of FW, check the box acknowledging your completed FWPE and complete the SEFWE.</td>
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PROCEDURES FOR SELECTING FIELDWORK LEVEL II PLACEMENTS

1. Investigate your areas of professional interest. This may include scheduled appointments with faculty, visiting facilities, talking with therapists and fieldwork students or other research.

2. Determine your financial needs. Keep in mind the cost of tuition, travel and living expenses during fieldwork. Students are encouraged to complete an out of town or out of state fieldwork both for personal growth, and to be exposed to new professional ideas.

3. Decide on a focus that will meet your professional needs and interests. Choices include mental health, inpatient and out-patient rehabilitation, community based practice, school systems, etc. Note that some sites require the completion of certain fieldwork experiences before you can be assigned that site.

Review the list of fieldwork sites and the dates that are available on the CORE. Only sites that have indicated availability will be visible to you on CORE. The materials on CORE include the AOTA Fieldwork Data Form, student requirements, pre-requisites and other facility specific information. See powerpoint presentation, Student Introduction to CORE ELMS, that was emailed to you, and the following instructions:
Click on 'scheduling' then 'research center'.
Click on [whatever is the appropriate rotation, ie FW IIB] under 'rotation type'.
Click on 'Run search'
When you see a facility you are interested in, click on 'View'.
If you want to choose this as one of your facilities, click 'Select' then scroll down and click 'Update preferences'. This will bring you to a page where you can click and drag your preferences into a new order or delete one you chose that you have changed your mind on.

Review the yellow hard files in Lee’s office; these files contain the SEFWEs that previous students have completed. Remember that these files are used by all students and must not be removed from the area. We no longer have active contracts with every facility in the yellow files but if you see a facility that interests you, email me to ask if we have a contract.

Complete the Request for Fieldwork form, indicating 5 fieldwork placement options in order of preference (i.e. number 1 is your top choice), and your reason for choosing them. Schedule an appointment with your faculty advisor. After discussion with you, your faculty advisor may ask you to add or remove sites based on best ‘fit’. Your faculty advisor will sign off on your Request for Fieldwork form after agreement with you. Turn the signed form in to the Academic Fieldwork Coordinator by the due date. See FW Level II Placement Request and Approval Forms on page 25.

After receiving approval from your Faculty Advisor, make your selections on CORE by the due date and put them in the order you want them. If your selections are not in by the due date, you will not be a part of the lottery and will automatically be last. If the AFWC does not have a signed Student Responsibility Agreement on file, you will not be included in the lottery and will not be placed with a site until this form has been received.
On the due date, the AFWC will run the lottery on CORE. CORE will create the lottery and you will never know what your number was. CORE will generate an email to you with the site you have been paired with.

The *Level II Fieldwork Assignment Agreement* form (see p. 24) will be placed in your box. Return signed copy to Academic Fieldwork Coordinator immediately. Your spot is not considered secure until this form has been turned in demonstrating your commitment to the fieldwork site.

The above process will be repeated for each subsequent fieldwork rotation, with a new lottery run each time.

The Academic Fieldwork Coordinator will notify you of any changes or problems that may arise regarding fieldwork.

The student should expect that at least one of the Level I and/or Level II experiences will be out of town. An ‘in town’ location is defined as the following parishes: Orleans, Jefferson, St. Tammany, Plaquemines, St. Bernard, St. Charles, St. James, and St. John.
Researching Preceptors/Sites

- Once you have researched and have found a Preceptor/Sites you would like to select, click “View” to see more details and their availability. The green checkmarks indicate those preceptors that you have already selected.

Making Preceptor/Site Selections

- The next screen will show items such as a Description, Documents, Requirements, Specialties, and the Open Availability.
Making Preceptor/Site Selections

- Click “Select” if you would like to preference this Preceptor/Site as a required rotation or click Select as Elective if you would like to preference as an Elective selection.

Updating Site Selections

- Once you have made your selections, you can then update the order of your selections by clicking on Scheduling > Site Selections on the left hand navigation.
- Click on Update under the list of selections you would like to change and then drag and drop to the order you prefer. Next, click Update Preferences to save your changes.
Viewing Your Schedule

- Once your school has finalized and opened your schedule for viewing you may see it in your Rotation Schedule.
- You will also be able to view a map of all of your Preceptor’s locations if their address was made available in the system.

Researching Preceptors/Sites

- In order to research, click on Scheduling > Research Center on the left hand navigation.
- Next, choose the criteria you would like to search for (i.e. Rotation Type, Rotation Date, State, etc.) and click Run Search.
Introduction:

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

See the Fieldwork Data Form in Appendix D
STUDENT RESPONSIBILITY AGREEMENT

As a student enrolled in the LSUHSC-New Orleans Occupational Therapy Department, I understand the following regarding Fieldwork Experience, Level II:

1. The department only guarantees fieldwork placements that meet the AOTA and department requirements. Students may request a specific placement, but the final decision is determined by availability of sites and will be made by the Academic/Clinical Fieldwork Coordinator.

2. The LSUHSC-New Orleans Occupational Therapy Program requires successful completion of six (6) months/120 days of Fieldwork Experience, Level II, prior to graduation.

3. Students may not participate in clinical, fieldwork or preceptorship courses until all prerequisite course work has been completed successfully. See Provisions for Academic Progression in general section of School of Allied Health Professions catalog.

4. A student who receives a grade of “Failure” in any Level II Fieldwork Experience twice, will be dismissed from the program regardless of the student’s cumulative grade point average. This requirement may be waived upon recommendation of the Department Head and approval of the Dean. The following is from the LSUHSC-N.O. Occupational Therapy Student Handbook in the Provisions for Academic Progression section:
   a. Student who earns a grade of Unsatisfactory or Failing a clinical fieldwork will be placed on scholastic probation, and must repeat the fieldwork.
   b. Students who fall from 1-10 quality points below a 3.0 cumulative GPA will be placed on scholastic probation.
   c. Students placed on scholastic probation must repeat those courses in which an unacceptable grade was earned when next regularly offered and earn a satisfactory grade [including OCCT 6670 and OCCT 6770]. Failure to meet this requirement will result in dismissal from the School.
   d. A course, including those designated clinical fieldwork (OCCT 6670 and OCCT 6770), may be repeated one time only. Students who repeat a course but earn an unacceptable grade will be dismissed from the school.

5. LSUHSC - New Orleans Department of OT requires that all Fieldwork be completed within 24 months following academic preparation.

6. There is a strong possibility that a fieldwork placement will have to be scheduled outside the local area.

7. Students assume their own financial responsibility for travel, living accommodations, etc., for each fieldwork placement. Very few facilities offer stipends, housing or meals.

8. After the paperwork has been completed, the fieldwork site has been confirmed by the facility, **there will be no changes** in the placement. If there is an **emergency or dire circumstance**, the student may request a change in writing indicating the cause/reason for a change. The request will be reviewed by the department to determine if a change is possible. **The student must realize that it is often not possible to honor these requests.**
9. A site may change areas of experience (e.g., from rehab to acute). This is not a reason for a student to request withdrawal from the placement contract.

10. The student assumes the responsibility to:
   A. Review the Technical Standards for Occupational Therapy to identify any potential accommodation needs. See Appendix E.
   B. Review fieldwork files and consider all contingencies prior to selecting fieldwork keeping in mind that fieldwork experience must provide a variety of diagnoses and age ranges per ACOTE Standards (2011).
   C. Submit selections on time -- if late, the Academic Fieldwork Coordinator may assign the placement.
   D. Meet the pre-requisite of each facility.
   E. Submit Personal Data Sheet, letter of intent and any required information to fieldwork educator 4 weeks prior to scheduled start date for Level II and 10 days for Level I.
   F. Submit copies of liability insurance, health insurance, CPR, criminal background check, drug screen, immunization record, flu vaccine, and any other forms required by the site, to CORE prior to start date.
   G. Take copies of the Student Evaluation of Fieldwork Experience (SEFWE) to each Fieldwork Level II site, complete a copy at close of fieldwork, submit a copy to the fieldwork educator and send a copy to the department by uploading on to CORE.
   H. Upon completion of fieldwork, write a letter of appreciation to the Director of the Occupational Therapy Department. Remember, these facilities receive no compensation for the time and effort extended in providing a good fieldwork educational experience.

11. Only the Academic Fieldwork Coordinator or designated representative can contact sites for the purpose of setting up fieldwork placements. All negotiating of Fieldwork II Experiences will be done through these official representatives of the school. The Fieldwork Contracts are legal matters and must be channeled through this office.

12. The student is responsible for contacting the school when problems arise during fieldwork.

                          Printed Name

                          Signed

                          Dated
LEVEL II FIELDWORK ASSIGNMENT AGREEMENT

I have worked collaboratively with the Academic Fieldwork Coordinator in selecting the following site for Fieldwork Experience, Level II:

Student: ______________________________________________________________

Facility name: ____________________________________________________________

Location: __________________________________________________________________

Type of fieldwork: _________________________________________________________

Dates: _____________________________________________________________________

I agree to honor my commitment to complete my fieldwork at this facility. I agree that unless the facility cancels this placement, no changes will be made to the choice of facility. I further agree to confirm my intent to affiliate no later than six weeks prior to the first day of affiliation and to provide the facility with a copy of my personal data sheet along with any other information required by the facility.

I agree to be responsible for:

a) following the administrative policies, rules, standards and practices of the Facility.

b) providing a health status report signed by my physician if required.

c) providing the necessary and appropriate uniforms required but not provided by the Facility.

d) providing my own transportation and living arrangements when not provided by the Facility.

e) reporting to the Fieldwork Educator at the Facility on time.

f) obtaining prior written approval of the Facility and School before publishing any material relating to the clinical education experience.

g) providing the highest caliber of service of which I am capable to the service recipients entrusted to my care.

Signature: __________________________ Date: ________________
(Student)

Signature: __________________________ Date: ________________
(Academic Fieldwork Coordinator)
FW Level II Placement Request and Approval Forms

Student Name: __________________________________________ Date: __________

Bring site information to meeting with faculty advisor!

1. Site Name/Location: _____________________________________________________

   Student’s Reason for choosing site: __________________________________________________________________________

2. Site Name/Location: _____________________________________________________

   Student’s Reason for choosing site: __________________________________________________________________________

3. Site Name/Location: _____________________________________________________

   Student’s Reason for choosing site: __________________________________________________________________________

4. Site Name/Location: _____________________________________________________

   Student’s Reason for choosing site: __________________________________________________________________________

5. Site Name/Location: _____________________________________________________

   Student’s Reason for choosing site: __________________________________________________________________________

FW Experiences to Date:

<table>
<thead>
<tr>
<th>FW Type (FW I or II)</th>
<th>Name of Facility</th>
<th>Type of Setting (Peds, Mental Health, Out-patient, etc)</th>
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Student’s Signature ________________________________
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<tr>
<th>Site #1:</th>
<th>Good Fit</th>
<th>Fair Fit</th>
<th>Poor Fit</th>
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<td>Comments:</td>
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<td>Site #2:</td>
<td>Good Fit</td>
<td>Fair Fit</td>
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<td>Comments:</td>
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<td>Site #3:</td>
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<td>Comments:</td>
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<td>Site #4:</td>
<td>Good Fit</td>
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<td>Site #5:</td>
<td>Good Fit</td>
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<td>Comments:</td>
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Additional Comments: ____________________________________________________________

_______________________________________________

Faculty Advisor Signature____________________     Date______________
Instructions for completing Personal Data Sheet

The Personal Data Sheet is similar to a brief autobiography and allows the fieldwork supervisor to know a little about you prior to your arrival. Complete one copy and then make a photocopy of it for each of your fieldwork educators. You will be responsible for including this completed copy with your letter of intent to be sent to the site not later than four weeks prior to the start date of each affiliation. This will enable the supervisor to select and plan learning experiences suited to your needs. Anything of interest, no matter how insignificant it may seem, can be of help to a fieldwork supervisor. So, please take time to complete this form.

SUGGESTIONS:

Special Skills and Interests - this can be anything special or unique to you and does not have to be directly related to OT.

Previous Work Experience - list all jobs held, even non-paying work experience and, again, this does not have to be clinically-oriented work experience.

Additional Comments - on a separate sheet of paper, describe your goals and expectations for this fieldwork experience. Also, discuss your perceptions of your strengths and weaknesses related to this clinical experience, i.e., have a lot of experience with children but need more opportunities to work with adults; need a structured experience in order to build self-confidence; enjoy the challenge of working independently.
PERSONAL DATA SHEET
FOR STUDENT FIELDWORK EXPERIENCE

PERSONAL INFORMATION

Name: __________________________________________________________________________________

Permanent Home Address: ____________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________

Phone number and dates that you will be available at that number

Phone Number _____________________________ Dates______________________________

__________________________________________________________________________________________________________________________

Name, address, and phone number of person to be notified in case of accident or illness:

__________________________________________________________________________________________________________________________

__________________________________________________________________________________________________________________________

EDUCATION INFORMATION

1. Expected degree (circle one)
   OTA:
     Associate  Baccalaureate  Masters  Doctorate Certificate
   OT:
     Baccalaureate  Masters  Doctorate  Certificate

2. Anticipated year of graduation ________________________

3. Prior degrees obtained _______________________________

4. Foreign languages read ____________________________ spoken___________________________

5. Do you hold a current CPR certification card? Yes _____ No _____
   Date of expiration ________________________

HEALTH INFORMATION

1. Are you currently covered under any health insurance? Yes _____ No _____

2. If yes, name of company
   __________________________________________________________________________

   Group # _________________________________ Subscriber # _______________________________

PREVIOUS WORK/VOLUNTEER EXPERIENCE

____________________________________________________________________________________

____________________________________________________________________________________
PERSONAL PROFILE

1. Strengths: _____________________________________________________________________________
   ______________________________________________________________________________________

2. Areas of needed growth: __________________________________________________________________
   ________________________________________________________________________________________

3. Special skills or interests: _______________________________________________________________
   ____________________________________________________________________________________

4. Describe your preferred learning style: ____________________________________________________
   ______________________________________________________________________________________

5. Describe your preferred style of supervision: _______________________________________________
   ______________________________________________________________________________________

6. Will you need housing during your affiliation? Yes _____ No _____

7. Will you have your own transportation during your affiliation? Yes _____ No _____

8. (Optional) Do you require any reasonable accommodations (as defined by ADA) to complete your
   fieldwork? Yes _____ No _____. If yes, were there any reasonable accommodations that you successfully
   used in your academic coursework that you would like to continue during fieldwork? If so, list them. To
   promote your successful accommodation, it should be discussed and documented before each fieldwork
   experience.
   ______________________________________________________________________________________
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FIELDWORK EXPERIENCE SCHEDULE

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<th>LENGTH OF FW</th>
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ADDITIONAL COMMENTS

AOTA Commission on Education (COE) and Fieldwork Issues Committee (FWIC); Amended and Approved by FWIC 11/99 and COE 12/99
Sample Format for Email Letter of Intent
to FW Educator

Your Name, MOTS
LSU Health Sciences Center
Date

Name of Clinical Fieldwork Educator
Fieldwork Facility

Dear Mr/Ms. Last name of FW Educator, LOTR

This letter is to confirm my intent to affiliate at your facility from _________________
to _______________. I look forward to working with you and your staff. Please find a copy
of my Personal Data Sheet attached. My proof of my health insurance, liability insurance, drug
screen, criminal background check, immunizations, CPR certification, and [other information
requested by this site] have been submitted to the CORE system.

Please send me information regarding dress code, reporting time, reporting place, parking, and
any other information that may be helpful in my final preparations to join you. My cell phone
number is __________. I would appreciate it if you would share your cell phone number with
me for any last-minute or unforeseen communication needs. Once again, I look forward to
working with you.

Sincerely,

Your Name, MOTS

Personalize this to your need for information and the requirements you know the site has.
Fieldwork Expectations and Evaluations
LSUHSC Expectations of the Student on FW Level II

Students will:

- Read and sign the *Student Responsibility Agreement* prior to placement at any FW site.
- Email the FW II site four to six weeks prior to start date to confirm dates, time and meeting location of first day. Included in the email is the student *Personal Data Sheet*.
- Complete all pre-fieldwork *Requirements* and upload to CORE.
- Take responsibility to provide feedback to fieldwork educator (FWE) to enhance learning experiences.
- Develop learning objectives with the fieldwork educator to tailor learning to preferred style and professional areas of growth.
- Complete any readings and research daily to be better prepared each day of fieldwork.
- Be an active learner, ask questions, and use all resources available in the fieldwork setting.
- Demonstrate initiative for learning by showing self-direction.
- Be familiar with and abide by the policies and procedures of the site.
- Receive and be responsive to feedback and criticism with an open mind.
- Integrate feedback into behavioral changes.
- Learn from mistakes by self-correcting and growing.
- Utilize any down-time in a productive manner.
- Communicate with the academic and/or clinical fieldwork coordinator regarding concerns and questions with the fieldwork experience.
- Communicate with the fieldwork educator regarding your learning style and collaborate on matching your learning style to the FWE’s supervisory style.
- Check school email daily.
- Comply with all aspects of the LSUHSC-N.O. *Academic Code of Conduct*.
- Notify the FWE and AFWC of any absences. *Absences must be made up* in a manner that is mutually agreeable to the FWE, the student, and the AFWC.
- Work the same hours as the FWE, including weekends and holiday, unless otherwise determined by the FWE and the AFWC.
- Fulfill all duties and assignments given by the FWE within the specified time frame.
- Complete all assignments given by the AFWC, including completion of the AOTA *Fieldwork Data Form*, the *Week 3 Fieldwork Update*, and the *SEFWE*.
LSUHSC Expectations of the Fieldwork Educator for Level II Fieldwork

Fieldwork Educators will:

- Provide a structured learning experience by organizing specifics weekly objectives to guide the student and fieldwork educator expectations.
- Expose the student to practice through observation, assisting, co-treating and role-modeling.
- Demonstrate how psychosocial factors that influence engagement in occupation are understood and integrated in the development of client-centered, meaningful, occupation-based outcomes in all settings.
- Challenge student performance gradually by reducing direction, and asking probing questions to support progressively greater independence.
- Guide student’s critical thinking to support professional reasoning.
- Design the fieldwork experience to promote clinical reasoning and reflective practice, to transmit the values and beliefs that enable ethical practice, and to develop professionalism and competence in career responsibilities.
- Ensure that the FW experience is consistent with the curriculum of the LSUHSC – New Orleans MOT program.
- Collaborate with the student to match your supervisory style to student’s learning style and needs.
- Ensure that the student has timely and confirming feedback throughout the fieldwork experience.
- Act as a role-model by engaging the student as a collaborator and team member.
- Deliver a balance of positive and constructive feedback.
- Provide weekly formal supervisory meetings throughout the 12 week fieldwork experience.
- Provide formal meeting at midterm and final evaluation of the student incorporating student’s self-evaluation, and input from other professionals in the setting.
- Collaborate with the academic fieldwork and/or the clinical fieldwork coordinator regarding concerns and questions with the student’s fieldwork experience.

To ensure there is an effective learning experience during fieldwork, a shared responsibility of both the student and fieldwork educator is expected. The student needs to be an active participant and an engaged self-advocate. The fieldwork educator needs to prepare a plan ahead of time with weekly expectations and provisions for opportunities for student learning. There may be a need to adjust your approach to supervision to the student’s learning style as they progress through the fieldwork experience.

LSUHSC Department of Occupational Therapy Policies Related to Fieldwork

Dress Code
1. All students are to comply with the dress code requirements of the facility in which they are assigned.
2. At minimum, students should wear LSUHSC-N.O. OT polo shirts, full-length pants, socks, and appropriate footwear to include flat shoes with closed heels and toes.
3. The student’s LSUHSC-N.O. identification badge should be worn at all times, unless an I.D. badge has been issued by the fieldwork site.
4. Students should use the following checklist as a guide for professional attire:

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Met</th>
<th>Not Met</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall neat &amp; clean grooming</td>
<td></td>
<td></td>
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<tr>
<td>No strong perfume or cologne</td>
<td></td>
<td></td>
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<tr>
<td>Piercings are minimized (studs only)</td>
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<tr>
<td>Conservative use of jewelry/accessories</td>
<td></td>
<td></td>
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<tr>
<td>Tattoos are covered</td>
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<td></td>
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<tr>
<td>Nails are neat and trim (tip no longer than ¼”; natural nails only)</td>
<td></td>
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<tr>
<td>Overall neat &amp; clean appearance of clothing</td>
<td></td>
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<tr>
<td>Appropriate fit to clothing (not too tight nor too baggy)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Appropriate shirt choice (opaque; no text/glitter/bedazzling)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Conservative neckline</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Chest/cleavage remains concealed when bending forward</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abdomen/low back remain concealed when reaching overhead</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Appropriate choice of pants (slacks, khakis)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Low back remains concealed when sitting</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Low back remains concealed when performing a transfer</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Low back remains concealed when kneeling on floor and reaching forward</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undergarments remain concealed during all movements</td>
<td></td>
<td></td>
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<tr>
<td>Appropriate footwear (flat shoes with closed heels and toes)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Wearing watch (should not rely on cell phone for time)</td>
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Confidentiality

All students enrolled at LSUHSC- N.O., are required to complete continuing compliance training through LSUHSC – N.O. Office of Compliance Programs, and in accordance with federal and state laws, including:

- Code of conduct
- HIPAA Privacy
- HIPAA Security
- Security and Confidentiality Statement (related to internet and email use)
- Family Educational Rights and Privacy Act (FERPA)
- The Breach Notification Rule

Students who do not complete all compliance training will be removed from their FW II site and will not be allowed to continue until all training modules are completed.

HIPAA Guidelines for Fieldwork

Per HIPAA guidelines, students cannot report this information in fieldwork assignments such as case study presentations:

- Name
- Location - includes anything smaller than a state, such as street address
- Dates - all, including date of birth, admission and discharge dates
- Telephone numbers
- Fax numbers
- Electronic e-mail addresses
- Social security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Account numbers
- Certificate and/or license numbers
- Vehicle identification numbers and license plate numbers
- Device identifiers and their serial numbers
- Web Universal Resource Locators (URLs)
- Internet Protocol (IP) address numbers
- Biometric identifiers, including finger and voice prints
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic, or code.

For written reports, the following information can be shared:

- Age (age 90 and over must be aggregated to prevent the identification of older individuals)
- Race
- Ethnicity
- Marital Status
• Codes (a random code may be used to link cases, as long as the code does not contain the person's social security number, date of birth, phone/fax numbers, etc.)

Students, as well as therapists, often keep "working files" in their desk. This is still allowed under HIPAA guidelines, however this information must be locked in a file cabinet when not in use, and must be shredded when no longer needed. See more at HIPAA Frequently Asked Questions: [http://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx#sthash.1qvnCYQb.dpuf](http://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx#sthash.1qvnCYQb.dpuf)

Social Media

Students should use the following guidelines when using any type of social media:

1. Always use good judgment about content and respect privacy laws. Do not include confidential information about LSUHSC – N.O., its faculty/staff, or its students.
2. Post should include only appropriate language. Inappropriate language includes, but is not limited to, obscene or threatening language or defamation (hate speech) based on race, sex, gender, religion, national origin, age, or disability.
3. Do not post information, photos or videos that will reflect negatively on you, your FW II facility, your FW educator, the OT department, or the institution.
4. It is strongly advised to avoid participating in actions that may be harmful or have a negative impact on the reputation of LSUHSC – N.O. and the services it offers.
5. Engaging in social networking during facility work hours is strictly prohibited.
6. Do not post personal information that can be used to locate someone offline, such as pictures, location, patient identifiers, ID badges, phone numbers, home/local addresses, birthdate, and email addresses.
7. Do not “friend” clients or caregivers on social media websites unless the friendship predates the clinical relationship. Do not “friend” your FW educator until after the experience is over.
8. Do not disclose confidential or derogatory information about the FW II site, its staff, or clients. Do not discuss personal opinions about a FW site and/or its clients and staff.
9. Under current law, it is forbidden to disclose any personal health information, including imaging of patients, or to discuss patient cases in any social network or digital media. Such behavior is a direct violation of HIPAA guidelines.

Cell Phone Use

Students should use official communication channels to communicate with their FW educators. It is left to the discretion of the FW educator whether or not he/she would like to provide personal phone numbers to students. Students should not use texting as a means of communication with their FW educator, unless this communication method has been approved by the FW educator. During facility work hours, students should keep their cell phones muted and not engage in active cell phone activity.
Attendance

- Students must complete 12 weeks/60 days of full time fieldwork for each experience; therefore, the student should plan to be at the fieldwork site daily for the duration of the rotation, requesting no days off.
- Obviously, absences can occur. Whether due to illness, religious observance, bereavement, or any other circumstance, **any missed days must be made up**. If the facility has weekend work hours, the day/s can be made up on a weekend. If the facility has no weekend work hours, the day/s will be added on to the end of the fieldwork rotation.
- The only exception to the above are pre-approved ‘professional days’. Professional days will not have to be made up. Professional days include any involvement in LEND or, for example, a capstone related clinic that must be attended. Professional days must be pre-approved by the AFWC or the faculty Capstone advisor.
- Students must promptly contact the Fieldwork Educator to report any absences or late arrivals. The student should discuss the preferred method of contact with the FWE on the first day of fieldwork.
- The student must report any absences to the AFWC by entering them on the CORE ELMS site, same day.
- The student must accommodate their schedule to that of the fieldwork site; this could include working weekends and holidays.
- Students receiving legal notice of jury duty or other court related appearances while on FWII should contact the AFWC. We will help the student request an extension or postponement of this obligation.
- Level II fieldwork must be completed within 24 months of finishing OT didactic coursework.

Safety Policies and Procedures

**Student Conduct**

During the academic and clinical portions of the program, all LSUHSC-N.O. occupational therapy students are required to abide by LSUHSC-N.O. School of Allied Health Professions “Policy and Procedures Related to Student Conduct”. Students are provided this document at new student orientation. All students are expected to review this document and must sign a form stating that they have done so.

**Substance Abuse**

All students at LSUHSC-N.O. are required to adhere to Chancellor’s Memorandum 23 (CM-23) – LSU Health Sciences Center New Orleans Drug Free Workplace and Workforce. Students are required to complete compliance training annually in the following areas:
- The Drug-Free Workplace Policy & Drug Testing Program
- Drug Free Schools and Communities

Students are also subject to the substance abuse policies set forth by their Level II Fieldwork site.
Safety in the Clinic
All LSUHSC-N.O. students are required to complete training via the Office of Compliance in the following areas:

- Quarterly Safety Training, to include:
  1. Safety responsibilities, general safety rules, fire safety, possible hazards (biological, chemical, and radiation), hazard communication, MSDS, reducing hazard exposure, emergency response, and hazardous waste procedures.
  2. Incident/accident reporting and investigation training.
  3. Personal protective equipment and job safety analyses.
  4. Use of fire extinguishers.

- Bloodborne Pathogens
- Internet/Network Safety

Students are taught Standard Universal Precautions and clinic safety during course work. Students are also required to adhere to all safety policy and procedures set forth by the Level II Fieldwork site.

Communication between the University and the Fieldwork Site

- Four weeks prior to the start of the FW II rotation, the assigned student will directly contact the FWE by email to provide their Personal Data Form and to ascertain information they will need to be successful at the site.
- Prior to the start of the FW II rotation, the Academic Fieldwork Coordinator (AFWC) will email the FW Educator a link and password to access the CORE ELMS site. An instructional PowerPoint presentation on use of the CORE ELMS site will also be email’d to the FWE. The FWE have access to the following on CORE ELMS:
  - The Week Three Level II FW Update (Appendix A)
  - The AOTA Fieldwork Performance Evaluation (FWPE) (Appendix B)
  - The Student Final Evaluation of the Fieldwork Site (SEFWE) (Appendix C)
  - The student’s completed Personal Data Form, immunization record, professional liability insurance and any other site-required student documentation.
- The AFWC will contact the FWE periodically during the fieldwork, including email reminders for appropriate evaluations at 3 weeks, mid-term, and final.
- The AFWC may make site visits to facilities in the metro New Orleans area while the student is on fieldwork, and will do so at FWE’s request.
- The AFWC will collaborate with the site and the FWE to maximize the learning process and troubleshoot any problems that may develop.
- The FWE will complete the Week Three Level II FW Update form, and the AOTA FWPE at both mid-term and final on the CORE ELMS system.
- FWEs are encouraged to view the Fieldwork 101: A Guide for Fieldwork Educators PowerPoint presentation on the LSUHSC-N.O. Department of Occupational Therapy’s home page.

http://alliedhealth.lsuhsc.edu/ot/default.aspx
• Fieldwork sites are encouraged to contact the AFWC for any assistance or questions regarding completion of the AOTA Fieldwork Data Form or the LSUHSC-N.O. Fieldwork Essentials form.
• If the FWE or Site Coordinator has specific concerns regarding the MOT program or the clinical education program, the clinician is asked to contact the AFWEC, Ingrid Franc, PhD, LOTR (504-568-4304; ifran1@lsuhsc.edu). If this is not possible, the clinician should contact the Department head, Kelly Alig, PhD, LOTR (504-568-4303; KAlig@lsuhsc.edu)

Communication between the Facility and the Student
The student will initiate contact with the facility as stated above in the first point of the section, Communication between the University and the Fieldwork Site. During the affiliation, it is expected that communication between the student and FWE will be ongoing, mutual, and constructive. The FWE has the responsibility to continuously assess student performance and recognize when the performance is at the correct level, above the expected level, or below the expected level. In the event the FWE determines that there is a problem, an early warning system will give the student an opportunity to improve. See Remediation Plan Procedure on page 47.
It is expected that students will take the responsibility to develop a good working relationship with their FWE. It is recommended that students and FWEs set aside time during the day to discuss patient issues and progress.

Communication between the University and the Student
• The AFWC will contact students during the fieldwork for progress reports via e-mail, telephone, or in person.
• Students should contact the AFWC at any time for discussion or problem solving. If a problem develops at any point, students must contact the AFWC immediately.
• The AFWC will provided all students with phone numbers to use for phone contacts. The AFWC will be available on evenings and weekends for phone contacts.
• The students will complete the Week Three Level II FW Update (see Appendix A) and the SEFWE on the CORE ELMS system.
• The students will acknowledge review of the final FWPE by checking the ‘I have read this report’ box on the document in CORE.
• The student will communicate any absences on CORE ELMs system, same day.
• Students must check their LSUHSC e-mail daily.
Evaluation Methods and Grading

The Week 3 Update (see Appendix A), will be completed at the end of the third week of fieldwork by both the FWE and the student, using separate forms on CORE. The student will review their Week 3 Update with the FWE and the FWE will review their Week 3 Update with the student. The AFWC will review all Week 3 Updates within three days of receiving them but any safety issues or other serious issues identified at this time should be brought to the attention of the AFWC by the student and/or FWE.

The AOTA Fieldwork Performance Evaluation (FWPE) (See Appendix B) is completed at mid-term (6 weeks). The mid-term should be completed on CORE ELMs by the FWE and reviewed with the student. The AFWC will review all Mid-terms within three days of receiving them but students who are not demonstrating satisfactory performance by achieving a score of below 90 points at mid-term must immediately contact the Academic Fieldwork Coordinator by phone for discussion. A learning plan will then be collaboratively developed between the site Fieldwork Educator, Academic Fieldwork Coordinator, and student.

The AOTA Fieldwork Performance Evaluation (FWPE) is also completed at the end of the Level II experience. The final should be completed on CORE ELMs by the FWE and reviewed with the student. After the student has reviewed the FWPE with the FWE, the student must sign-in to CORE, view the completed FWPE, and click the ‘I have read this report’ box.

All required Correspondence and Assignments must be submitted; see OCCT 6670 and OCCT 6770 syllabi.

A grade of Satisfactory/Unsatisfactory will be recorded by the Academic Fieldwork Coordinator. 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. An overall final score must be 122 points and above to receive a passing grade. The final grade for level II fieldwork will be assigned by the Academic Fieldwork Coordinator.

The student completes the Student Evaluation of Fieldwork Experience (SEFWE; see Appendix C) at the end of the Level II experience on the CORE ELMs system.
Introduction and Purpose of a Remediation Plan

The vast majority fieldwork experiences go smoothly for the student and the Fieldwork Educator (FWE). In the event that issues arise with student performance, a remediation plan will be put into effect. The purpose of a remediation plan is to facilitate student success on the fieldwork, and should not be viewed as a punitive measure. A remediation plan will detail the expected student performance and give a date for expected achievement of the objective. In addition, resources will be suggested so that students can take initiative in improving their performance in the areas that need strengthening.

Remediation

Grounds for Remediation:

1. If the student does not follow the policies and procedures of the facility, including, but not limited to, violations of patient/facility confidentiality, patient safety, attendance, and professional behavior.
2. If the student does not abide by the American Occupational Therapy Association Code of Ethics of Beneficence, Nonmaleficence, Autonomy, Justice, Veracity, and Fidelity (see Appendix I), or the Policies and Procedures Related to Student Conduct of the LSUHSC-N.O. School of Allied Health Professions.
3. If the student does not meet the objectives and goals of the facility, and the course, within an agreed-upon time frame.
4. If the student does not follow the verbal and/or written recommendations that have been given to the student by the FWE in an effort to improve patient care and treatment.
5. If the student does not fulfill all duties and verbal and/or written assignments made by the FWE within the agreed-upon time limit.

Remediation Plan Procedure for Fieldwork

1. The FWE and/or student will identify the problem(s) and attempt solution(s) with specific documented goal(s). The use of a learning/remediation contract is highly recommended. See Appendix E.

2. The FWE will contact the Academic Fieldwork Coordinator (AFWC) by phone or e-mail indicating problem(s).

3. Should the FWE and student be unable to develop a solution/remediation plan, the AFWC will meet with FWE and student and attempt to negotiate solution(s)/remediation plan. A learning/remediation contract format will be used.

4. The AFWC will notify student of options as related to education, including determination of whether switching student to another fieldwork site is feasible.
and/or appropriate, withdrawing from the course, timeline for repeating the course, effect on graduation date.

6. Goals and time frame must be documented with a copy to student, Academic Fieldwork Coordinator and Fieldwork Educator.

**Withdrawal/Termination from Fieldwork**

**Grounds for Termination:**

1. If it is determined by the Fieldwork Educator that the student’s behavior may cause harm to patients, self, the FWE, or other employees of the facility. The AFWC will make an administrative referral to the Campus Assistance Program (CAP) as needed.
2. Unsafe practice, substance abuse, failure to complete expected requirements may result in termination of the fieldwork.
3. Insubordination, excessive tardiness, and/or risks to patient care may result in termination of the fieldwork.
4. Continued unsatisfactory performance, as evidenced by lack of achievement of all or part of the agreed-upon goals and objectives on the learning/remediation contract within the agreed-upon time limit may result in termination of the fieldwork.

**Withdrawal/Termination Procedures:**

1. A student request to withdraw from the Fieldwork Assignment must be made in writing to the FWE with a copy to the AFWC, indicating reasons for withdrawal and the commitment to fulfill final patient-related obligations as determined by the facility. The AFWC, in conjunction with the program’s Clinical Education Committee, will review the request for withdrawal, and the AFWC will communicate to the student their opinion. Depending on the reasons given for withdrawal and the opinion of above faculty, possible outcomes could include encouraging the student to stay at the current site, locating an alternative site, or completing the fieldwork at a different time, possibly delaying graduation. After fulfillment of patient-related obligations, the student’s withdrawal from the facility is complete.
2. Following a failed remediation plan, a FWE request for the student to be withdrawn from fieldwork must be made in writing to the AFWC, including reasons for termination. The FWE will then complete the following steps:
   a. The student and FWE will meet to determine the professional obligations related to patient care that must be fulfilled prior to final exit.
   b. The FWE and student will schedule an exit interview to ensure all patient-care related obligations have been met.
   c. The FWE will contact the AFWC after the exit interview to confirm separation of the student from the clinical site.
d. After completion of steps 2a-c above, withdrawal from the facility is complete.

3. The student will schedule an appointment with the AFWC after separation from the clinical site. One of the following options will be completed:
   a. Should the student separate from the fieldwork site prior to the last day to drop courses per the Allied Health Academic Calendar, the student will receive a ‘W’ for the course. This will not affect the student’s grade point average.
   b. Should the student’s fieldwork be terminated after the last day to drop a course, and if the reason for termination is student illness or injury that requires medical or CAP intervention, the student will receive an ‘Incomplete’ for the course. This will not affect the student’s grade point average.
   c. Should the student’s fieldwork be terminated after the last day to drop a course, and if the reason for termination is that the FWE and the AFWC have determined the student demonstrates “failing” performance, the student may be given a ‘Fail’ for the clinical affiliation. This could affect grade point average and ability to remain in the program.

4. The student must withdraw from course OCCT 6670 or OCCT 6770 by contacting the Director of Student Affairs, Yudi Cazanas by e-mail, phone, or in person. E-mail is preferred. She will then direct the student on procedures for withdrawing from the course. Yudi Cazanas, Room 6B17; 504-568-4253; YDelga@lsuhsc.edu

5. The student will be provided another opportunity to achieve the clinical affiliation requirements at a similar clinical setting determined by the AFWC. The student will re-enroll in the course that was terminated. This opportunity may delay graduation date. If the student does not achieve the requirements at the second fieldwork opportunity, a grade of “Fail” will be assigned and may result in program dismissal.

6. The Promotions Committee will have the responsibility for final action relating to the student’s promotions in the program (Refer to Academic Policies in the Student Manual).

Note: All meetings, goals, and action taken must be documented.
LSUHSC Student Health Services

LSU Student Health Clinic

The Louisiana State University Student Health Clinic offers a variety of health services. Physicians in the Student Health Clinic are board certified. For more information on student health insurance, please see http://www.lsuhsc.edu/orgs/studenthealth/insurance.

BlueCross BlueShield Insurance (See bcbsla.com)

LSUHSC-New Orleans is again offering our students the option of purchasing student health insurance through BlueCross BlueShield of Louisiana. If students have coverage through their own plans or as a dependent of someone else, they will continue to have to provide proof of this coverage.

Student Health Services

We provide primary health care, mental health assistance, immunizations, woman’s health exams, and exams for away rotations/residency. Nurse only appointments may be scheduled for immunizations by calling (504) 412-1366. For additional information, see the Student Health Handbook.

Location and Hours

Student Health Services is located on the 7th floor of the Lions Building
2020 Gravier Street, New Orleans, LA 70112
Hours are 8:30 a.m. to 5:00 p.m.
Monday - Friday
Phone: (504) 525-4839
Fax: 866-814-9706

There are 4 satellite Student Health Clinics:

- 3700 St. Charles Ave.
  (504) 412-1366
  Closed from 11:30 am – 1:00 pm
- 2025 Gravier St. (Call for MD availability; Nurse available M-F)
  412-1517
- 200 W. Esplanade Ave., Suite 701 (By Appointment Only)
  (504) 412-1705
  8:00 a.m. to 4:30 p.m.
- LSU Internal Medicine Resident Clinic (Immunizations and Labs only)
  2003 Tulane Ave., 1st floor
  8:00 am – 11:30 am

After Hours Care: After 4:30pm and on weekends and holidays, contact Dr. Lauren Davis @ 412-1366. For immediate treatment you may go to the emergency room.
Student FAQs
Rites of Passage for Occupational Therapy Students

As you, the student, leave the academic classroom and move to the clinical setting of occupational therapy, a rite of passage is occurring. You have been introduced to the clinical setting in your Fieldwork I experiences, but now you are expected to perform the many roles of an entry level occupational therapist. As with all rites of passage, there is a certain amount of the unknown and with that, some fear and some hopes. The following are some hints to help you to see that fear is a natural part of transitions and to provide some suggestions on how to manage the fears that you may feel.

A common fear among students is that they will be asked to do too much, too soon, alone.

It is important for you to communicate what you do feel ready to do, and more importantly what you do not feel ready to do. Many students do feel anxious when asked to perform skills that they have not learned in school. It is important to discuss this with your clinical instructor and ask for a little practice with feedback on these areas to increase your confidence. Be sure you know how to contact your clinical instructor at all times. Learn the facility’s procedures for emergencies. Ask for help when needed, no matter how dumb it may seem. Failing to ask for help protects your feelings of inadequacy rather than the patient’s welfare.

Almost all students think their clinical instructors expect them to be “perfect.” Sometimes clinical instructors fear that students expect them to be “perfect.”

You may have very high expectations of yourself, but the probability that every procedure will be performed perfectly each time is very slim. It is common for students to expect themselves to show the expertise professionals have worked for years to attain. The clinical fieldwork experience is not to produce experts but for you as a competent entry level therapist to evaluate yourself, be accountable for your actions, and ask for help when needed. Your clinical instructor will provide you a valuable role model to demonstrate their way to provide quality care. You will eventually develop your own treatment style which will be a combination of all your experiences. Follow you clinical instructor during your fieldwork and let development of your own style wait until after you have started your own job.

Many students fear that they will be responsible to recall all the theoretical information and facts that they have just learned.

No one has immediate recall of all the information they have learned. It is important for you to know where and how to look up the information that you need. Focus on the information relevant to the setting that you are in and develop the skill of finding the additional information that you will need from time to time.

A fear that some students have is that they will be expected to meet a quota for the number of treatments provided or to complete tasks within a specific amount of time.

Reasonable expectations are good. You may perform better under a certain amount of stress. Too
little or too much may be associated with a decrease in work quality. Doing a good job is more important than numbers or speed. You will gradually be able to increase in efficiency and time management skills.

A few students fear that they will be a burden to their clinical instructor.

Occupational therapy workplaces are often very fast paced and you may hesitate to ask questions. It is good to set up a specific time of day to meet with your clinical instructor and save questions for this time. However, the priority of the information needed may necessitate a more immediate answer. Use your best judgment in seeking information that you need.

Just as you need to understand the basis of your fears and how to deal with those, you need to look at your hopes and aspirations for your clinical experiences. The goals you develop with patients need to be realistic and attainable and so must the ones you set for yourself.

Most students want to be challenged during their fieldwork experience.

It is exciting to be able to use the new knowledge and techniques you have just learned. Be patient and let your clinical instructor guide your development of practical application to your new information. Every hour of every day cannot be focused on new experiences and it is through repetition that one hones their skills to new levels.

Students want to be allowed to make mistakes.

The freedom to make mistakes carries the responsibility to accept constructive criticism and to learn from mistakes. You will not be perfect, but you need to work closely with your clinical instructor to safeguard the patients during the learning process. Be honest about your abilities and be willing to explore new ideas under the guidance of your clinical instructor.

It is common for students to hope to be treated with respect and to be acknowledged for their experience and knowledge. (Clinical Instructors also want this honor).

Respect must be mutual and trust is essential for a successful student/clinical instructor relationship. Respect and trust require work by both parties and must be earned over time.

Many students feel excited and at least a little nervous at first and hope the clinical instructor will understand.

Most people naturally feel a little nervous and apprehensive approaching a new endeavor such as a new clinical experience. Many clinical instructors remember when they were student interns and will help you with these emotions. The important thing for you to do is to communicate these feelings to your clinical instructor and to be realistic about your expectations of the fieldwork experience.
The following was adapted to LSUHSC from the Washington University School of Occupational Therapy.

**WHAT HAPPENS IF …………..**

As students prepare for fieldwork, they often have a list a “what if” questions. The following list has been prepared as a quick reference for frequently asked questions.

*What happens if…..*

- **Everything is fine:**
  
  Call or email your Academic Fieldwork Coordinator (AFC) at the school and tell her!

- **I see unethical things going on:**
  
  Do not automatically assume that you have interpreted the observed situation accurately. Call a trusted mentor to discuss. This could be your AFC, an advisor at school, etc. Students should seek clarification on the issue from the fieldwork educator before drawing conclusions. Yes, this can be intimidating. If you determine that you need to take action, the questioning approach can be along the lines “I observed __________ yesterday and I am confused, I do not understand why that happened, could you please clarify for me?” If the answer to this query clears up your question, then no need to proceed further. If you are still not satisfied with the answer, there are several steps to take:
  
  - Ask again, just to make sure that you are certain about what you have seen
  - Tell your fieldwork educator that you are feeling uncomfortable with the approach being used and would like to discuss the policy with the next up in the chain of command
  - Discuss the situation with your AFC
  - If all involved determine that the action is questionable or unethical, then your AFC will need to work with the site and you to determine what the next course of action should be. This could include but is not limited to changing of fieldwork educator, switching to another program at fieldwork site or removal from fieldwork site.

  Dealing with questionable ethics is very difficult for anyone – student or practicing therapists. The above-described approach is direct and can be intimidating to carry through. Students must remember that they are learning how to be professionals, and one of the most important characteristics of any effective professional is the ability to address a situation openly and honestly.

- **I get hurt or become sick:**
  
  - Should you get an injury or become ill while at work, first, follow the program/facility guidelines and obtain the appropriate medical services? If necessary and appropriate, contact family/friends etc.
  - If you are hurt or become ill outside of fieldwork hours, first seek appropriate medical attention. After you have been cared for and the physician has instructed you on activity restrictions (if any) contact both your fieldwork educator and your AFC. The fieldwork educator and AFC will determine the impact of this illness or injury on the fieldwork experience.
• Contact the AFC the week of the illness or injury and let her know what happened, how you are and the impact this might have on your fieldwork experience.
• Should your fieldwork experience need to be delayed for any reason due to injury or illness— you, your fieldwork educator and the AFC will need to discuss possible options to make up time. Any changes in the fieldwork experience should involve a discussion with all parties: **students should not make decisions about their fieldwork timeline independent of the school.**

• **I have a family emergency:**
  • If you are contacted about an emergency at work, talk with your fieldwork educator about your needs and concerns. Together you will need to determine, for the immediate future, what the plan of action will be.
  • If you are contacted about an emergency after work hours and cannot make it to work the next day, contact your fieldwork educator either at home or first thing in the morning. If possible, it is best to talk directly with the fieldwork educator and not leave a message. If you need to leave a message, call back later to make sure that the message was received.
  • At some point contact school and inform them of the situation. If you are unable to call the school, ask your fieldwork educator to contact the school for you. Once the situation has stabilized, contact your AFC to discuss how long you need to be away from fieldwork and other pertinent information. **The school and the fieldwork site will make decisions on what will happen with the fieldwork experience after discussion with the student.**

• **There is a natural disaster or emergency situation at my fieldwork site:**
  • Seek shelter, following the policies and procedures of the fieldwork site.
  • Seek medical attention as needed. Follow same steps as described above if you are injured.
  • If/when possible get word to family and school to let them know what has happened and your condition.

• **I do not like my Fieldwork Educator:**
  In a working relationship, personal feelings about a co-worker or fieldwork educator need to be kept in check. You may have different views about politics, religion, life choices, etc., but these are personal opinions that should not enter into a working relationship. Is it easy to ignore? No. BUT, especially for a student, you are not there to debate the pros and cons of the latest Supreme Court decision. You are at the fieldwork site to learn. The first thing that you need to figure out is if you can learn from your fieldwork educator. If the answer is yes, then, you need to overcome your own personal feelings about subject matter that doesn’t relate to the fieldwork experience and forge ahead with the learning opportunity you have been given.
  As with most difficult situations, the best approach (and often times the most intimidating) is the direct approach. Talk with your fieldwork educator about your concerns of student/fieldwork educator compatibility. Give that fieldwork educator the opportunity to make some changes. Consider your role in the relationship, be prepared to get constructive feedback on your working style and be prepared to make changes in your approach to the fieldwork experience.

  Keep in mind that this fieldwork experience is not forever and if you can make it work then do that. If you feel like you and your fieldwork educator really cannot get along, then explore other options. If another fieldwork educator is available, consider requesting a change. Remember, just as you want to know what you are doing right or wrong, your fieldwork educator needs to get that feedback as well. Do
not show up one day requesting a change in fieldwork educators. Make sure that you have gone through the proper channels that your fieldwork educator is aware of your frustrations and agrees that this is the best idea in order for you to have a successful experience.

Contact the AFC if problems persist. Do not wait until the problem is insurmountable and you are at risk of failing the fieldwork experience.

- **There are other students at this site and I do not get along with one/some/all of them:**
  This is a working relationship. You should handle the situation just like you would if you were an employee. Try to find common areas or interests for you and the other student to explore. If you find there is nothing in common, or your work styles do not mesh and you are having difficulty getting your job done, discuss with your fieldwork educator. Again, you do not have to personally like someone to work effectively with them.

- **I am concerned about the competence of my Fieldwork Educator:**
  This is not an easy situation. The first thing you need to figure out is can you learn in that environment. If you can learn and contribute to the setting, then see if you can make it work for the remainder of your experience. If you do not think you can learn in the practice environment there are some options.

- **First:** Your fieldwork educator needs to know that you have concerns. Do not surprise him/her with the fact that you are not happy. You do not have to say, “I think you are incompetent”, but you do need to address the issue. You can ask questions such as “I’m not sure I understand the rationale behind that approach, could you explain” or “I have read about ____, which is different that what you are doing, can you help me understand the differences?” You may find that you have underestimated the fieldwork educator, or that you do not have a full grasp of the situation.

- **Next,** contact the AFC and explain your concerns and efforts to remediate the situation. If, after discussion with your fieldwork educator and AFC, you still feel that you cannot learn in the current environment, a change in fieldwork educators can be requested if one is available, or request a withdrawal all together from the experience. The AFC should be involved in any discussions to change the AFC. Withdrawal from an experience has many ramifications and is not something that a student on fieldwork can decide without discussion with the fieldwork educator and AFC.

- **My Fieldwork Educator quits while I am there:**
  Do not panic! Most places will develop a back up plan for situations like this. Either there is another therapist that you can work with or they have another location within their system that you can transfer to. Your fieldwork educator should contact the AFC at your school to inform them of the situation and to review options for the continuation of your fieldwork experience.

- **My fieldwork site does not practice OT the way I was taught:**
  All practitioners are called on to follow the Standards Practice as outlined in *The Guide to Occupational Therapy Practice (AOTA, 1998)* and *Occupational Therapy Practice Framework: Domain and Process, 3rd* (AOTA 2014). Within this framework, there is a lot of leeway in how services are actually delivered. If the fieldwork site does not practice OT the way you were taught, there are typically two reasons why. First, OT schools work very hard to provide you with training in the latest advances in OT. These advances are perfected in the practice setting. If LSUHSC did not teach you a particular approach or technique, it may be that the approach is new or in the process of being developed – a great opportunity for you to take advantage of while on fieldwork. Second, the philosophy towards client care
may be very different at your fieldwork site when compared to your school. The LSUHSC Program has taught you to be very client centered and to use an occupation-based approach when developing interventions. On the flip side your fieldwork site may practice through one frame of reference with all clients. For example, the therapists at your fieldwork site may have a biomechanical approach and use interventions such as exercising or cone placement. If you find yourself in this dilemma, discuss the differences in what you have been taught and what you are seeing in practice with both your fieldwork educator and your AFC. The information you get from the AFC and fieldwork educator should help you balance out the discrepancies you are seeing in practice.

A word of caution, if you are told “well this is how it’s done in the real world”, be careful. A good fieldwork site combines many different educational and treatment approaches; there is no one way to do the right thing. A good therapist will stay open to new ideas and treatment approaches throughout his/her career.

By the same token, you have to be ready to bend and mold yourself to the situation as appropriate. You may be very clear on how an activity or intervention should be performed and still be told that you need to modify your approach. If you find that you have difficulty modifying, consider that it may not be the fieldwork site that has a problem, it may be you.

If you find yourself in a situation where you cannot seem to resolve the differences in what you were taught and what is in practice on fieldwork, discuss your issues with your AFC and your fieldwork educator what options are available for the remainder of your experience.

- I am on a “non-traditional” fieldwork and the OT is not with me very often:
  The Accreditation Council for Occupational Therapy Education (AOTA, 2011) states that for Level II experiences when an OT practitioner is not on site, a plan for the provision of occupational therapy services must be documented and provided to the student, school and fieldwork site. When on-site supervision is provided, it must be in accordance with the plan and meet state credentialing guidelines. In this type of setting, the OT student must receive a minimum of eight (8) hours of occupational therapy supervision per week. This includes direct observation of client interaction. During all working hours the occupational therapy fieldwork educator must be readily available for communication and/or consultation if needed. A “non-traditional” fieldwork should not last over twelve weeks.

  If you are working in a setting with part-time OT supervision, make sure that you know who to go to when you have OT questions. On a Level II fieldwork, the supervision plan should outline whom to contact when you have a question about service delivery and occupational therapy in general. Contact the AFC immediately if you are not receiving adequate mentoring and supervision.

- I am the primary caregiver for my (children, parents, grandparents, etc.). I have taken steps to make sure that they are taken care of while I’m on fieldwork, but sometimes they get sick and need me at home:
  Situations like this warrant open and honest discussion with your fieldwork educator. Your fieldwork educator needs to know that you have outside obligations that may impact your attendance at fieldwork. Prior to talking with your fieldwork educator, prepare a list of options to cover your caregiver obligations should you not be able to leave work and prepare a list of options to get your work covered if you need to leave work. Such options can include but are not limited to, working on Saturdays,
extended evening hours, and working beyond the planned 12 weeks. Share this information with your fieldwork educator, this type of planning shows them that you are committed to the fieldwork experience and want to make sure that your participation as a full member of the team.

- I do not agree with the marks that I’ve been given on my evaluation:
  Evaluating a student on fieldwork is not easy. There is much time, thought and effort that goes into completing an evaluation. The fieldwork educator is the expert while on your fieldwork experience. His/her judgment needs to be respected. There is a reason why he/she has that opinion of you and your work, figure out why that is and move on from there.

In the event of a personality clash between student and fieldwork educator and either the student or fieldwork educator feels that the poor personal relationship might interfere with the evaluation of performance, the AFC should be contacted as soon as possible. A discussion should occur with all parties and an action plan developed to address the personality issues.

Hints for a Successful Fieldwork Experience
- Communication is vital. Do not be afraid to share your strengths and growth areas on day one. I highly encourage you to identify your own personal goals for this experience, and to share concerns you might have from the very beginning. If your supervisor is aware of your goals and your concerns, he/she can help you address those areas immediately and throughout your experience.
- Remember that, as a student, Level II is not an 8-5 kind of job. You will be expected to put in extra hours, it will take you longer to get some tasks done and you will probably be asked to do more work than some of the other staff. It won’t always be like this, but for now, this is your hands on learning time, take advantage of it!
- Take your books to your fieldwork site with you. You will still need to study throughout this experience.
- Relax, have fun, enjoy working with your clients!

The AOTA website Student section has many helpful resources developed by the Assembly of Student Delegates (ASD). Check it out!
Appendices
Appendix A: Week 3 Level II Fieldwork Update
Department of Occupational Therapy – Week Three Level II Fieldwork (FW) Update

Please complete on CORE, fax to 504-568-4306 or scan and email to ifran1@lsuhsc.edu.

**PART A**

Student Name: _______________________________________________________________

Facility Name: ______________________________________________________________

FW Educator Name: ___________________________ Department Phone#: _____________

FW Educator Email Address & Phone #: _________________________________________

Date(s) Absent: ___________________________ Makeup Dates: _____________________

**PART B – To be completed by student (check only one answer per question)**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are you making progress towards your goals?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are you receiving adequate constructive formative and summative feedback?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are you receiving daily feedback and mentorship?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Do you feel prepared for this experience?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Are you seeing a good variety of clients, intervention approaches, and experiences?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Do you need a phone call or email?</td>
<td></td>
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</tbody>
</table>

Please comment on any negative responses:

Student Signature____________________________________Date_________________

**Part C – To be completed by the Fieldwork Educator**

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the student academically prepared to meet the demands of the clients?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is the student integrating classroom knowledge with clinical application?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Is the student making progress on meeting his/her goals?</td>
<td></td>
<td></td>
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<tr>
<td>4. Is the student receptive to your feedback and mentorship?</td>
<td></td>
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<tr>
<td>5. Does the student demonstrate effective communication skills with clients, families, team members, and you? (verbal, nonverbal, written, listening)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Is the student safe in clinical application, judgment, &amp; professional conduct?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Do you need a phone call or email?</td>
<td></td>
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</tr>
</tbody>
</table>

Comments:

FWE Signature____________________________________Date_________________
Appendix B: AOTA Fieldwork Performance Evaluation (FWPE)
Fieldwork Performance Evaluation
For The Occupational Therapy Student

NAME: (LAST) (FIRST) (MIDDLE)

COLLEGE OR UNIVERSITY

FIELDWORK SETTING:

NAME OF ORGANIZATION/FACILITY

ADDRESS: (STREET OR PO BOX)

CITY STATE ZIP

TYPE OF FIELDWORK

ORDER OF PLACEMENT: 1 2 3 4 OUT OF 1 2 3 4

FROM TO:

DATES OF PLACEMENT

NUMBER OF HOURS COMPLETED

FINAL SCORE

PASS: NO PASS:

SIGNATURES:
I HAVE READ THIS REPORT.

SIGNATURE OF STUDENT

NUMBER OF PERSONS CONTRIBUTING TO THIS REPORT

SIGNATURE OF RATER #1

PRINT NAME/CREDS/POSITION

SIGNATURE OF RATER #2 (IF APPLICABLE)

PRINT NAME/CREDS/POSITION

SUMMARY COMMENTS:
(ADDRESSES STUDENT'S CLINICAL COMPETENCE)
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 1988 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 his/her 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 6% 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/modified 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

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

   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

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

**TOTAL SCORE**

**MIDTERM:**
Satisfactory Performance................................. 90 and above
Unsatisfactory Performance............................... 89 and below

**FINAL:**
Pass ..................................................... 122 points and above
No Pass ................................................ 121 points and below
REFERENCES

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)

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 Kay 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, intertwined 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 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)

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Appendix C: Student Evaluation of the Fieldwork Experience (SEFWE)
STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE)

Purpose:

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

- Enable the Level II fieldwork student who is completing a placement at the site to evaluate and provide feedback to the fieldwork educator[s] and fieldwork setting
- Enable academic programs, fieldwork sites, and fieldwork educators to benefit from student feedback in order to develop and refine their Level II fieldwork programs
- Provide objective information to students who are selecting sites for future Level II fieldwork

This form is designed to offer each program the opportunity to gather meaningful and useful information. Programs may adapt this form to suit their needs.

Instructions to the Student:

Complete the SEFWE before your final meeting with your fieldwork educator(s).
Make a copy of the form for yourself. This form gets submitted to your fieldwork educator during or after you review your final fieldwork performance evaluation (FWPE). The SEFWE is signed by you and the fieldwork educator(s).

Instructions to the Fieldwork Educator(s):

Review the SEFWE with the student after the final Fieldwork Performance Evaluation (FWPE) has been reviewed and signed.
The SEFWE is signed by both the fieldwork educator(s) and the student.
Return both the FWPE and SEFWE promptly upon completion of the fieldwork to the academic fieldwork coordinator.
STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE

Fieldwork Site: ____________________________________________________________

Address: __________________________________________________________________

__________________________________________________________________________

Type of Fieldwork: _______________________________________________________

Placement Dates: from _________________________ to _______________________

Order of Placement: [ ] First    [ ] Second    [ ] Third    [ ] Fourth

Student work schedule:
Hours required: __________ per week
☐ Weekends required ☐ Evenings required
☐ Flex/Alternate Schedules Describe: __________________________________________

Identify Access to Public Transportation: ________________________________

Please write your 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 on _______________________.

(date)

__________________________________________  _____________________________
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—WEEK 1
Indicate the adequacy of the orientation by checking “Yes” (Y) or “Needs Improvement” (I).

<table>
<thead>
<tr>
<th>TOPIC</th>
<th>Adequate</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site-specific fieldwork objectives</td>
<td></td>
<td></td>
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<tr>
<td>Student supervision process</td>
<td></td>
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<tr>
<td>Requirements/assignments for students</td>
<td></td>
<td></td>
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<tr>
<td>Student schedule (daily/weekly/monthly)</td>
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<tr>
<td>Agency/Department policies and procedures</td>
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<tr>
<td>Documentation procedures</td>
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<tr>
<td>Safety and Emergency Procedures</td>
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</tbody>
</table>

CLIENT PROFILE

Check age groups worked with performance: List most commonly seen occupational issues in this setting

<table>
<thead>
<tr>
<th>Age</th>
<th>Occupational Performance Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–5 years old</td>
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<tr>
<td>6–12 years old</td>
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<tr>
<td>13–21 years old</td>
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<tr>
<td>22–65 years old</td>
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<tr>
<td>65+ years old</td>
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</tbody>
</table>

Describe the typical population: _________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
## OCCUPATIONAL THERAPY PROCESS

### I. EVALUATION

<table>
<thead>
<tr>
<th>List assessment tools used</th>
<th>Observed</th>
<th>Performed</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

### II. INTERVENTION

List major therapeutic interventions frequently used and indicate whether each was provided as individual, group, or co-treatment, or as a consultation. List other professionals involved.

<table>
<thead>
<tr>
<th>Types of Intervention</th>
<th>Individual</th>
<th>Group</th>
<th>Co-Tx</th>
<th>Consultation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupations: client-directed life activities that match/support/address identified goals</td>
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<tr>
<td>Activities: meaningful to client, address performance skills and patterns to facilitate occupational engagement</td>
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<tr>
<td>Preparatory methods: modalities, devices and techniques. These are provided to the client, no active engagement</td>
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<tr>
<td>Preparatory tasks: actions that target specific client factors or performance skills. Requires client engagement</td>
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</table>
Education: provides knowledge & enhances understanding about occupation, health and well-being to client to develop helpful behaviors, habits, routines

Training: develops concrete skills for specific goal attainment. Targets client performance

Advocacy: promotes occupational justice and empowers clients

Identify theory(ies) that guided intervention: ________________________________

III. OUTCOMES

Identify the types of outcomes measured as a result of OT intervention provided:

<table>
<thead>
<tr>
<th>Type of outcome</th>
<th>yes</th>
<th>no</th>
<th>Provide example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational Performance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevention</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Health &amp; Wellness</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Quality of Life</td>
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<tr>
<td>Participation</td>
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<td></td>
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<tr>
<td>Role competence</td>
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<tr>
<td>Well-being</td>
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<tr>
<td>Occupational Justice</td>
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</tbody>
</table>

**OTPF-III terminology

ASPECTS OF THE ENVIRONMENT

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>The current Practice Framework was integrated into practice</td>
<td></td>
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<tr>
<td>Evidence-based practice was integrated into OT intervention</td>
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</tr>
</tbody>
</table>

77
There were opportunities for OT/OTA collaboration

There were opportunities to collaborate with other professionals

There were opportunities to assist in the supervision of others—specify:

There were opportunities to interact with other students

There were opportunities to expand knowledge of community resources

Student work area/supplies/equipment were adequate

Additional educational opportunities provided with comments (specify):

DOCUMENTATION AND CASE LOAD

Documentation Format:

☐ Narrative ☐ SOAP ☐ Checklist ☐ Other: __________________________

☐ Hand-written documentation ☐ Electronic

If electronic, name format & program: __________________________

Time frame & frequency of documentation: __________________________

Ending student caseload expectation: _____ # of clients per week or day
Ending student productivity expectation: _____ % per day (direct care)

SUPERVISION

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

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

Frequency of meetings/types of meetings with fieldwork educator (value/frequency): __________________________
General comments on supervision: ____________________________________________

SUMMARY of FIELDWORK EXPERIENCE

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td>Expectations of fieldwork experience were clearly defined</td>
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<tr>
<td>Expectations were challenging but not overwhelming</td>
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<tr>
<td>Experiences supported student’s professional development</td>
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</tbody>
</table>

Circle one

What particular qualities or personal performance skills should a student 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:

___________________________________________________________________________

Overall, what changes would you recommend in this Level II fieldwork experience?

___________________________________________________________________________

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

___________________________________________________________________________
Would you recommend this fieldwork site to other students? Yes or No ___

Why or why not?

_______________________________________________________________________________

INSTRUCTIONS
One form must be completed for each fieldwork educator who provided supervision. You can detach this page and make more copies as needed.

Check the box that best describes your opinion of the fieldwork educator’s efforts in each area

FIELDWORK EDUCATOR NAME: ____________________________

FIELDWORK EDUCATOR YEARS OF EXPERIENCE: __________

1 = Strongly Disagree
2 = Disagree
3 = Neutral
4 = Agree
5 = Strongly agree

<table>
<thead>
<tr>
<th>Provided ongoing positive feedback in a timely manner</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provided ongoing constructive feedback in a timely manner</td>
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<tr>
<td>Reviewed written work in a timely manner</td>
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<tr>
<td>Made specific suggestions to student to improve performance</td>
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<tr>
<td>Provided clear performance expectations</td>
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<tr>
<td>Sequenced learning experiences to grade progression</td>
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</tr>
<tr>
<td>Used a variety of instructional strategies</td>
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<tr>
<td>Taught knowledge and skills to facilitate learning and challenge student</td>
<td></td>
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<tr>
<td>Identified resources to promote student development</td>
<td></td>
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<tr>
<td>Presented clear explanations</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Facilitated student’s clinical reasoning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Used a variety of supervisory approaches to facilitate student performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elicited and responded to student feedback and concerns</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adjusted responsibilities to facilitate student’s growth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supervision changed as fieldwork progressed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided a positive role model of professional behavior in practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modeled and encouraged occupation-based practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modeled and encouraged client-centered practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modeled and encouraged evidence-based practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modeled and encouraged interprofessional collaboration</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Modeled and encouraged intra-professional collaboration</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix D: AOTA Fieldwork Data Form
Introduction:

The primary purpose of the Fieldwork Data Form is to summarize information regarding the program at a fieldwork site. Occupational therapy (OT) and occupational therapy assistant (OTA) students will find valuable information describing the characteristics of the fieldwork setting; the client population; commonly used assessments; interventions; and expectations and opportunities for students. The Fieldwork Data Form has been developed to reflect the *Occupational Therapy Practice Framework: Domain and Process, 3rd Edition* (American Occupational Therapy Association [AOTA], 2014) terminology and best practice in occupational therapy to promote quality fieldwork experiences. The data gathering processes used in completion of this form entails a collaborative effort that facilitates communication between OT and OTA academic programs, students, and fieldwork educators. This form may be completed by the combined efforts of the fieldwork educator, the OT or OTA student assigned to the site for fieldwork, and/or the Academic Fieldwork Coordinator (AFWC) from the program. Fieldwork sites are encouraged to update the form annually and provide a copy to the educational program(s) where they have a current memorandum of understanding (MOU).

The secondary purpose of the Fieldwork Data Form is to document the connection between the curriculum design of a given OT or OTA educational program with its fieldwork component. The AFWC will use the data entered on the form to document fieldwork related Accreditation Council for Occupational Therapy (ACOTE) Standards (ACOTE, 2012). The standards are outlined in Section C of the 2011 ACOTE standards and are denoted on the form. Educational programs can revise the form to suit the needs of their respective fieldwork programs.

The Fieldwork Data Form was developed through the joint efforts of the Commission on Education (COE) and the Academic Education (formerly Education) Special Interest Section Fieldwork Community of Practice with input from many dedicated AFWCs and fieldwork educators.
# AOTA Fieldwork Data Form

**Date:**

**Name of Facility:**

**Address:** Street

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

<table>
<thead>
<tr>
<th>FW I</th>
<th>FW II</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contact Person:</strong></td>
<td><strong>Contact Person:</strong></td>
</tr>
<tr>
<td><strong>Phone:</strong></td>
<td><strong>Phone:</strong></td>
</tr>
<tr>
<td><strong>Email:</strong></td>
<td><strong>Email:</strong></td>
</tr>
<tr>
<td><strong>Initiation Source:</strong></td>
<td><strong>Initiation Source:</strong></td>
</tr>
<tr>
<td>[ ] FW Office</td>
<td>[ ] FW Office</td>
</tr>
<tr>
<td>[ ] FW Site</td>
<td>[ ] FW Site</td>
</tr>
<tr>
<td>[ ] Student</td>
<td>[ ] Student</td>
</tr>
<tr>
<td><strong>Corporate Status:</strong></td>
<td><strong>Corporate Status:</strong></td>
</tr>
<tr>
<td>[ ] For Profit</td>
<td>[ ] For Profit</td>
</tr>
<tr>
<td>[ ] Nonprofit</td>
<td>[ ] Nonprofit</td>
</tr>
<tr>
<td>[ ] State Gov't</td>
<td>[ ] State Gov't</td>
</tr>
<tr>
<td>[ ] Federal Gov't</td>
<td>[ ] Federal Gov't</td>
</tr>
<tr>
<td>[ ] Prefer full-time</td>
<td>[ ] Prefer full-time</td>
</tr>
<tr>
<td><strong>Preferred Sequence of FW:</strong> AOTA/Standards 5.105</td>
<td></td>
</tr>
</tbody>
</table>

## OT Fieldwork Practice Settings:

**Hospital-based settings**
- [ ] Inpatient Acute
- [ ] Inpatient Rehab
- [ ] SNF/Sub-Acute/Acute Long-Term Care
- [ ] General Rehab Outpatient
- [ ] Outpatient Hands
- [ ] Pediatric Hospital/Unit
- [ ] Pediatric Hospital Outpatient
- [ ] Inpatient Psychiatric

**Community-based settings**
- [ ] Pediatric Community
- [ ] Behavioral Health Community
- [ ] Older Adult Community Living
- [ ] Older Adult Day Program
- [ ] Outpatient/hand private practice
- [ ] Adult Day Program for DD
- [ ] Home Health
- [ ] Pediatric Outpatient Clinic

**School-based settings**
- [ ] Early Intervention
- [ ] School
- [ ] Other area(s):
  - Please specify:
  - [ ] 6-8
  - [ ] 9-12
  - [ ] 13-21
  - [ ] 22-64
  - [ ] 65+

## Age Groups:
- [ ] 0-5
- [ ] 6-12
- [ ] 13-21
- [ ] 22-64
- [ ] 65+

**Number of Staff:**
- [ ] OTRs:
- [ ] OTAs/COTAs:
- [ ] Aides:
- [ ] PT:
- [ ] Speech:
- [ ] Resource Teacher:
- [ ] Counselor/Psychologist:
- [ ] Other:

## Student Prerequisites (check all that apply) AOTA/Student: 5.105
- [ ] CPR
- [ ] First aid
- [ ] Pediatric/Adult medical history
- [ ] MMR
- [ ] Tuberculosis
- [ ] Drug screening
- [ ] HEPA training
- [ ] Chest x-ray
- [ ] Fingerprinting
- [ ] Own transportation
- [ ] Interview

## Health Requirements:
- [ ] Physical Check up
- [ ] Varicella
- [ ] Influenza
- [ ] Tetanus
- [ ] Hepatitis
- [ ] HepB
- [ ] Mumps
- [ ] Rubella
- [ ] Polio
- [ ] Please list any other requirements:

Please list how students should prepare for a FW II placement such as doing readings, learning specific evaluations and interventions used in your setting: AOTA/Standards 5.105

## Student Work Schedule and Outside Study Expected:

- [ ] Schedule hrs/week/day:
- [ ] Room provided
- [ ] Yes
- [ ] No
- [ ] Meals
- [ ] Yes
- [ ] No
- [ ] Scheduling
- [ ] Yes
- [ ] No
- [ ] Stipend amount
- [ ] Yes
- [ ] No

**Describe the FW environment/atmosphere for student learning:**

**Describe available public transportation:**
Types of OT Interventions addressed in this setting (check all that apply):

<table>
<thead>
<tr>
<th>Activities of Daily Living (ADL)</th>
<th>Instrumental Activities of Daily Living (IADL)</th>
<th>Education</th>
<th>Work</th>
<th>Social Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bathing/showering</td>
<td>Care of others/pets</td>
<td>Formal education participation</td>
<td>Employment interests and pursuits</td>
<td>Community</td>
</tr>
<tr>
<td>Toileting and toilet hygiene</td>
<td>Care of pets</td>
<td>Informal personal education needs or interests exploration</td>
<td>Employment seeking and acquisition</td>
<td>Family</td>
</tr>
<tr>
<td>Dressing</td>
<td>Child rearing</td>
<td>Informal personal education participation</td>
<td>Retirement preparation and adjustment</td>
<td>Peer/friend</td>
</tr>
<tr>
<td>Swallowing/eating</td>
<td>Communication management</td>
<td>Training</td>
<td>Education: describe</td>
<td>Advocacy: describe</td>
</tr>
<tr>
<td>Feeding</td>
<td>Driving and community mobility</td>
<td>Social Participation</td>
<td>Group Interventions: describe</td>
<td></td>
</tr>
<tr>
<td>Functional mobility</td>
<td>Financial management</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Personal device care</td>
<td>Health management and maintenance</td>
<td></td>
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<tr>
<td>Personal hygiene and grooming</td>
<td>Home establishment and management</td>
<td></td>
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<tr>
<td>Sexual activity</td>
<td>Meal preparation and clean up</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rest and Sleep</td>
<td>Safety and emergency maintenance</td>
<td></td>
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<tr>
<td>Rest</td>
<td>Shopping</td>
<td></td>
<td></td>
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<tr>
<td>Sleep preparation</td>
<td>Leisure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sleep participation</td>
<td>Leisure participation</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Play</td>
<td>Preparatory Methods and Tasks. Methods,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play exploration</td>
<td>adaptations and techniques that prepare the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play participation</td>
<td>client for occupational performance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activities: Designed and selected to</td>
<td>Preparatory tasks</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>support the development of skills</td>
<td>Exercices</td>
<td></td>
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</tr>
<tr>
<td>and performance patterns, roles, habits, and routines that enhance</td>
<td>Physical agent modalities</td>
<td></td>
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<tr>
<td>occupational engagement</td>
<td>Splinting</td>
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<tr>
<td></td>
<td>Assistive technology</td>
<td></td>
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<tr>
<td></td>
<td>Wheelchair mobility</td>
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<tr>
<td></td>
<td>Examples</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Method of Intervention

Direct Services/Case load for entry level OT
- One-to-one
- Small group(s)
- Large group

Discharge/Outcomes of Clients (% clients)
- Home
- Another medical facility
- Home health

Outcomes of Intervention
- Occupational performance improvement and/or enhancement
- Health and Wellness
- Prevention
- Quality of life
- Role competence
- Participation

OT Intervention Approaches
- Create, promote health/habits
- Establish, restore, remEDIATE
- Maintain
- Modify, facilitate compensation, adaptation
- Prevent disability

Theory/Frames of Reference/Models of Practice
- Acquisitional
- Biochemical
- Cognitive/Behavioral
- Coping
- Developmental
- Ecology of Human Performance
- Model of Human Occupation (MOHO)
- Occupational Adaptation
- Occupational Performance
- Person-Environment-Occupation (PEO)
- Person-Environment-Occupational Performance (PEOP)
- Psychosocial
- Rehabilitation frames of reference
- Sensory Integration
- Other (please list)

Please list the most common screenings and evaluations used in your setting:

- Medications
- Post-surgical (list procedures)
- Contact guard for ambulation
- Fall risk
- Other (describe): Swallowing/choking risks
- Behavioral systems' privilege level (locked areas, grounds)
- Sharps count
- 1 to 1 safety/suicide precautions

84
### Performance skills, patterns, contexts and client factors addressed in this setting

<table>
<thead>
<tr>
<th>Performance Skills</th>
<th>Client Factors</th>
<th>Context(s):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor skills</td>
<td>Values</td>
<td>Cultural</td>
</tr>
<tr>
<td>Process skills</td>
<td>Beliefs</td>
<td>Personal</td>
</tr>
<tr>
<td>Social interaction skills</td>
<td>Spirituality</td>
<td>Temporal</td>
</tr>
<tr>
<td>Performance Patterns:</td>
<td>Mental functions (affective, cognitive, perceptual)</td>
<td>Virtual</td>
</tr>
<tr>
<td>Person:</td>
<td>Sensory functions</td>
<td>Environment:</td>
</tr>
<tr>
<td></td>
<td>Neurosensorial and movement-related functions</td>
<td>Physical</td>
</tr>
<tr>
<td></td>
<td>Muscle functions</td>
<td>Social</td>
</tr>
<tr>
<td></td>
<td>Movement functions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cardiovascular, hematomatological, immunohematological, and respiratory system functions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Voice and speech functions, digestive, metabolic, and endocrine system functions</td>
<td></td>
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<tr>
<td></td>
<td>Skin and related-structure functions</td>
<td></td>
</tr>
</tbody>
</table>

### Most common services priorities

<table>
<thead>
<tr>
<th>Most common services priorities (check all that apply):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct service</td>
</tr>
<tr>
<td>Discharge planning</td>
</tr>
<tr>
<td>Evaluation</td>
</tr>
<tr>
<td>Interventions</td>
</tr>
</tbody>
</table>

### Target caseload/productivity for fieldwork students:

<table>
<thead>
<tr>
<th>Productivity (%) per 40-hour week:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caseload expectation at end of FW:</td>
</tr>
<tr>
<td>Productivity (%) per 8-hour day:</td>
</tr>
<tr>
<td>Number groups per day expected at end of FW:</td>
</tr>
</tbody>
</table>

### Documentation: Frequency/Format (briefly describe):

- Handwritten documentation:
- Computanized medical records:
- Time frame requirements to complete documentation:

### Administrative/Management Duties or Responsibilities of the OTA/OTA Student:

- Schedule own clients
- Supervision of others (Level 1 students, aides, OTA, volunteers)
- Budgeting
- Procuring supplies (shopping for cooking groups, client/intervention-related items)
- Participating in supply or environmental maintenance
- Other:

### Student Assignments. Students will be expected to successfully complete:

- Research/EBP/Literature review
- In-service
- Case study
- In-service participation/grand rounds
- Fieldwork project (describe):
- Field visits/rotations to other areas of service
- Observation of other units/disciplines
- Other assignments (please list):
OPTIONAL DATA COLLECTION:

The question includes in this section may be used by academic programs to demonstrate compliance with the Accreditation Council for Occupational Therapy Education (ACOTE) Standards documentation for fieldwork.

1. Please identify any external review agencies that accredit/recognition this FW setting and year of accreditation/recognition. Examples: JCAHO, CARF, Department of Health, etc.

   Agency for External Review: (name)
   Year of most recent review: 
   Summary of outcomes of OT Department review:

   Agency for External Review: (name)
   Year of most recent review: 
   Summary of outcomes of OT Department review:

   Agency for External Review: (name)
   Year of most recent review: 
   Summary of outcomes of OT Department review:

2. Describe the fieldwork site agency stated mission or purpose (can be attached).

3. OT Curriculum Design Integrated with Fieldwork Site (insert key OT academic curricular themes here). ACOTE Standards C.I.A.C.I.C.I.
   a. How are occupational-based needs evaluated and addressed in your OT program??
   b. Describe how you seek to include client-centered OT practice. How do clients participate in goal setting and intervention activities?
   c. Describe how psychosocial factors influence engagement in occupational therapy services.
   d. Describe how you address clients community-based needs in your setting.

4. How do you incorporate evidence-based practice into interventions and decision making? Are FW students encouraged to provide evidence for their practice? ACOTE Standards C.I.G.C.I.

5. Please describe the FW Program and how students fit into the program. Describe the progression of student supervision from novice to entry-level practitioner using direct supervision, co-treatment, and monitoring, as well as regular formal and informal supervisory meetings. Describe the fieldwork objectives, weekly fieldwork expectations, and record keeping of supervisory sessions conducted with student. Please mail a copy of the FW student objectives, weekly expectations for the Level II FW placement, dress code, and copy of an entry-level job description with essential job functions to the AFWC. ACOTE Standards C.I.A.C.I.C.I.C.I.

6. Please describe the background of supervisors by attaching a list of practitioners who are FW educators including their academic program, degree, years of experience since initial certification, and years of experience supervising students. ACOTE Standards C.I.G.C.I.G.C.I.G.C.I.

7. Describe the training provided for OT staff for effective supervision of students (check all that apply). ACOTE Standards C.I.G.C.I.G.C.I.
   - Supervisory models
   - Training on use of FW assessment tools (such as the AOTA Fieldwork Performance Evaluation—FWPE, the Student Evaluation of Fieldwork Experience–SEFWE, and the Fieldwork Experience Assessment Tool—FEAT)
   - Clinical reasoning
   - Reflective practice

   Comments:
8. Please describe the process for record keeping of supervisory sessions with a student, the student orientation process to the agency, OT services, and the fieldwork experience. **AOTA Standards C1.2, C1.3, C1.13**

   **Supervisory Patterns—Description** (respond to all that apply)
   - **1:1 Supervision model:**
   - Multiple students supervised by one supervisor:
   - Collaborative supervision model:
   - Multiple supervisors share supervision of one student; number of supervisors per student:
   - Non-OT supervisors

9. Describe funding and reimbursement sources and their impact on student supervision.

**STATUS/TRACKING INFORMATION SENT TO FACILITY:**

<table>
<thead>
<tr>
<th>Date:</th>
</tr>
</thead>
</table>

Which documentation does the fieldwork site need?
- [ ] Fieldwork Agreement/Contract?
- [ ] Memorandum of Understanding (MOU)?

Which FW Agreement will be used?
- [ ] OT Academic Program Fieldwork Agreement
- [ ] Fieldwork Site Agreement/Contract

<table>
<thead>
<tr>
<th>Title of parent corporation (if different from facility name):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Type of business organization (Corporation, partnership, sole proprietor, etc.):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>State of incorporation:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Fieldwork site agreement negotiator:</th>
<th>Phone:</th>
<th>Email:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Address (if different from facility):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street:</th>
<th>City:</th>
<th>State:</th>
<th>Zip:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of student:</th>
<th>Potential start date for fieldwork:</th>
</tr>
</thead>
</table>

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

**Information Status**

- [ ] New general facility letter sent:
- [ ] Level I Information Packet sent:
- [ ] Level II Information Packet sent:
- [ ] Mail contract with intro letter (sent):
- [ ] Confirmation sent:
- [ ] Model behavioral objectives:
- [ ] Week-by-week outline:
- [ ] Other information:
- [ ] Database entry:
- [ ] Facility information:
- [ ] Student fieldwork information:
- [ ] Make facility folder:
- [ ] Print facility sheet:
Appendix E: Learning Contract Template & Sample Learning Contract
# Learning Contract Template

<table>
<thead>
<tr>
<th>Learning Objectives (What do I need to learn?)</th>
<th>Strategies and Resources needed to meet the objectives (How will I learn?)</th>
<th>Evidence (How will I demonstrate that I have learned?)</th>
<th>Criteria for Evaluation (How will I be evaluated?)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Signature: ___________________________  Date: ___________________

Fieldwork Educator Signature: ___________________________
## Section 3: Learning Contract
### SAMPLE

<table>
<thead>
<tr>
<th>Learning Objective(s)</th>
<th>Strategies &amp; Resource(s) required to meet the objective(s)</th>
<th>Evidence (How will I demonstrate that I have learned?)</th>
<th>Criteria for Evaluation &amp; Means of Validation (How do I want to be evaluated?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>To perform safe and independent transfers under minimal supervision.</td>
<td>Observe fieldwork educator at least 3 times. Observe other therapists at least 2 times. Practice on other students at least 2 times. Review class notes. Perform at least 3 transfers under maximum supervision.</td>
<td>Perform at least one transfer in safe and competent manner by December 12, 2003.</td>
<td>Verbal feedback from fieldwork educator with regard to: 1. appropriate position and stabilization. 2. safety precautions (e.g. wheelchair brakes in correct position) 3. appropriate transfer method selected and demonstrated. Verbal feedback from client (felt safe etc.) Personal reflections after the transfer.</td>
</tr>
<tr>
<td>To develop rapport with adult Clients in the day hospital.</td>
<td>Observe fieldwork educator and other team members interaction and communication skills on at least 6 occasions. Talk to at least 2 other students about methods of developing rapport.</td>
<td>Demonstrate initial rapport by the end of the second week (i.e. November 28), by: Maintaining good eye contact Using appropriate tone of voice Demonstrating appropriate body language</td>
<td>Feedback from team members (i.e. physio, social worker, nurse). Feedback from fieldwork educator on the items listed under &quot;Evidence&quot;. Feedback would be appreciated (at minimum) at midterm and</td>
</tr>
</tbody>
</table>
Appendix F: LSUHSC-N.O. Policies and Standards
Technical Standards for Occupational Therapy

The school is committed to enabling student with disabilities to complete the course of study of our program by means of reasonable accommodations consistent with the Americans with Disabilities Act (ADA). These technical standards articulate the expectations and requisite abilities considered essential for occupational therapy students to become primary providers of occupational therapy services. All students admitted into this program should be able to demonstrate these abilities at the time of admission and at all times during matriculation. If accommodations are needed by a student to perform the technical standards, he or she must notify the Associate Dean for Academic Affairs at (504)568-4244 after being accepted into the program.

The major function of an Occupational Therapist (OTR) with registered certification is to provide occupational therapy services including evaluation, intervention planning, implementation, and review; discharge planning; outcomes assessment; and related documentation and communication.

The following technical standards describe the essential eligibility requirements for participation and progression in the occupational therapy curriculum. Standards cover observation skills, behavioral and social skills, communication, psychomotor skills, and cognitive skills. It is the expectation of the Department of Occupational Therapy that students engage at all times in client-centered, occupation-based services in a safe, professional and compassionate manner. These skills are necessary for successful transition into the clinical world of the occupational therapist.

Observation Skills

1. Students must be able to achieve the required competencies in the classroom setting from a variety of educational experiences in both basic arts and sciences and clinical settings.

2. Individuals must accurately observe human performance, discriminating between a safe and an unsafe environment and between therapeutic and non-therapeutic behavior and contexts.

3. Individuals must perceive, assimilate, and integrate information.

4. Individuals must demonstrate adequate functional use of visual, tactile, auditory, and other sensory and perceptual modalities to enable such observations and information acquisition.

Communication Skills

1. Effective communication is critical for students to build relationships with faculty, fellow graduate students, coworkers, clients, and their significant others in the student’s various roles of learner, colleague, consultant, and leader.
2. Individuals must be able to gather, comprehend, utilize, and disseminate information effectively, efficiently, and according to professional standards.

3. Communication should be comprehensible by patients, professionals, and laypersons.

4. Individuals must be able to communicate effectively and sensitively with patients and colleagues, including individuals from different cultural and social backgrounds; this includes, but is not limited to, the ability to establish rapport and communicate with others.

5. Individuals must demonstrate the ability to observe, recognize and understand non-verbal behavior.

6. Individuals must participate in group and face-to-face discussions/presentations in a clear, organized, and professional manner.

**Intellectual/Conceptual Skills**

1. Students must demonstrate critical thinking skills so that they can problem-solve creatively, master abstract ideas, and synthesize information presented in academic, clinical and fieldwork settings.

2. Individuals must be able to measure, calculate, reason, analyze, process, integrate, synthesize, apply and retain facts, concepts, and data.

3. Individuals must develop and exhibit a sense of Professional ethics, and also recognize and apply pertinent legal and ethical standards.

4. Individuals must be able to combine separate pieces of information or specific answers to problems to come up with logical explanations for why seemingly unrelated events occur or are utilized together.

5. Individuals must use ingenuity and imagination in solving novel, ill-defined problems in complex, real-world settings.

**Psychomotor**

1. Students must possess the motor functions needed to manipulate tools or handle clients in a variety of settings, under a variety of conditions.

2. Individuals must demonstrate the physical strength and coordination to safely handle and move clients; perform medical procedures, or direct clients in various practice settings according to the needs of their discipline.

3. Individuals must perform physical activities that require considerable use of arms and legs and moving one’s whole body, such as climbing, lifting, getting up and down from the floor, balancing, walking, bending, stooping and handling of material and people. Standing and sitting for long periods of time are also necessary. This includes being able to apply physical restraints, and to lift, push and pull at least 50 pounds for routine transfers from varying surfaces, and be able to manually adjust equipment found in the occupational therapy clinical setting.
4. Individuals must possess adequate fine motor skills to be able to manipulate small objects, manage scissors, fabricate splints, and utilize tools /activities.

5. Individuals must tolerate being in close physical proximity and in physical contact with others.

**Behavioral & Social Skills**

1. Students must demonstrate emotional stability and acceptable communication skills, and be capable of developing mature and effective interpersonal relationships with other students, health care workers, clients and their significant others that inspire trust and respect and exceptional therapeutic use of self.

2. Individuals must be able to tolerate the physical, mental, and emotional academic and clinical workloads and to function effectively under stress.

3. Individuals will be able to adapt to changing environments, display flexibility, and function in the face of the uncertainties inherent in the clinical and academic setting.

4. Individuals must demonstrate the ability to self-reflect and understand why they respond/think/feel in the way that they do and then self-correct, if necessary. Openness and responsive to feedback is considered essential for success.

5. Individuals will safely perceive and navigate varied environments and communities.

6. Individuals must exhibit the ability and commitment to work collaboratively and professionally with individuals and groups in an intense setting to meet the needs of people of diverse cultures, age groups, socioeconomic groups and challenges without bias and in a harmonious manner.

7. Individuals must support and promote the activities of peers and health care professionals by sharing knowledge, eliciting input, and acting with empathy toward others.

8. Individuals must demonstrate compassion; integrity, concern for others, interpersonal skills; interest and motivation are all personal qualities that are critical.

**Professional Responsibilities**

1. Students must exhibit the ability to meet the challenges of any academic, medical or clinical situation that requires a readiness for immediate and appropriate response without interference of personal or medical problems.

2. Students have the responsibility to attend and be able to travel to and from classes and clinical assignments on time, and possess the organizational skills and stamina for performing required tasks and assignments within allotted time frames.

3. Individuals must have the ability to perform problem-solving tasks in a timely manner and prioritize and organize multiple workload needs, completing required work within the specified due dates.

4. Students will take initiative to direct their own learning as evidenced by the ability to prepare in advance, utilize resources before asking for help and independently explore additional information. Students must be able to take responsibility for their actions and outcomes.
5. Students need to work cooperatively and collaboratively with other students on assigned projects, and participate willingly in a supervisory process involving evaluation of other students and their own abilities and reasoning skills via giving and receiving feedback, as well as looking for ways to improve.

6. Students must adhere to policies of the university, their program, and clinical sites. This includes matters ranging from professional dress and behavior, to attending to their program’s academic schedule.

7. Students must demonstrate knowledge of and commitment to the code of ethics of their profession and behavior that reflects a sense of right and wrong in the helping environment.
**Student Conduct**

During the academic and clinical portions of the program, all LSUHSC – New Orleans occupational therapy students are required to abide by LSUHSC – New Orleans School of Allied Health Professions “Policy and Procedures Related to Student Conduct”. Students are provided this document at new student orientation.

**Substance Abuse**

All students at LSUHSC-N.O. are required to adhere to Chancellor’s memorandum 23 (CM-23), LSUHSC-N.O. Drug Free Workplace and Workforce. Students are required to complete annual compliance training in the following areas:
- The Drug-Free Workplace Policy & Drug Testing Program
- Drug Free Schools and Communities

Students are also subject to the substance abuse policies set for by their Level II Fieldwork site.

**Safety in the Clinic**

All LSUHSC-N.O. students are required to complete training via the Office of Compliance in the following areas:
1. Safety responsibilities, general safety rules, fire safety, possible hazards (biological, chemical, and radiation), hazard communication, MSDS, reducing hazard exposure, emergency response, and hazardous waste procedures.
2. Incident/accident reporting and investigation training.
3. Personal protective equipment and job safety analyses.
4. Use of fire extinguishers.
5. Bloodborne pathogens safety.
6. Internet/Network Safety.

Students are taught Universal Precautions and clinic safety in OCCT 6530: Applications I, and in OCCT 6730: Applications II.

**Student Health**

See page for list of Student Health Services locations and phone numbers.

As a condition of enrollment, all LSUHSC-N.O. students must have health insurance (purchased through the institution or the student must provide proof of coverage).

**Office of Compliance**

As part of enrollment at LSUHSC-N.O., students are required to complete training in accordance with federal and state laws and regulations in the following areas:
- Code of Conduct
- HIPAA Privacy
- HIPAA Security
- Quarterly Safety Meetings
- Security and Confidentiality
All students are required to abide by the policies and procedures of the Level II Fieldwork sites to which they are assigned. Emergency plans are reviewed as part of a student’s orientation to the facility.

**Emergency Disaster Plan**

All students are required to abide by the policies and procedures of the Level II Fieldwork sites to which they are assigned. These policies and procedures are reviewed as part of a student’s orientation to the facility.

**At-Risk Incidences, Crisis Incidences, Illness and Injury**

All students should report any of these instances to their assigned FW educator as soon as possible. Students are required to abide by the policies and procedures of the Level II Fieldwork sites to which they are assigned. These policies and procedures are reviewed as part of a student’s orientation to the facility.
Appendix G: LSUHSC-N.O. Contracts and Affiliation Agreements
Policy and Procedure for New Affiliation Agreements

Should a student request a Fieldwork experience with a facility that does not have a current contract with LSUHSC-N.O., the student will complete the following steps:

1. Make the initial contact with the facility and secure the facility’s willingness to accept the student for fieldwork. This must be the agreement of either the Site Coordinator, the Director of Rehab Services or a Manager of Occupational Therapy at the site.

2. Obtain the facility agreement in writing and forward to the AFWC.

Only after the facility has agreed to accept the student will the AFWC begin the New Affiliation Agreement Process as stated below.

Should the AFWC identify a facility with which it would be desirable to have an affiliation agreement, the following steps will be taken:

1. The AFWC will make initial contact with the facility and determine willingness to affiliate with LSUHSC-N.O. Department of Occupational Therapy.

2. The AFWC will obtain legal name of the facility and contact information.

3. The LSUHSC-N.O. Department of Occupational Therapy’s Department Coordinator will complete a search of the facility on the Office of the Inspector General’s website and the Secretary of State in the relevant state. She will complete the LSUHSC-N.O. School of Allied Health Affiliation Agreement (AA) template.

4. The Department Coordinator will forward all of the above to the office of the Dean of the School of Allied Health.

5. After review by the Dean, the Department Coordinator will forward the document to the facility for review and signature, with instructions to return it to the Office of the Dean.

6. Once the Dean has approved of, and signed, the Affiliation Agreement, the Dean will inform the Department Coordinator. A copy of the AA will be stored by the Office of the Dean on the List and on the Department of Occupational Therapy’s CORE software system.
ALLIED HEALTH AFFILIATION AGREEMENT

This Affiliation Agreement, effective as of the ____ of ____, ______ by and between

BOARD OF SUPERVISORS OF LOUISIANA STATE UNIVERSITY AND AGRICULTURAL AND MECHANICAL COLLEGE ON BEHALF OF ITS LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER - NEW ORLEANS

(hereinafter referred to as "University"), appearing through its authorized representatives, Larry H. Hollier, M.D., Chancellor, Louisiana State University Health Sciences Center – New Orleans, and JM Cairo, PhD, Dean, Louisiana State University School of Allied Health Professions in New Orleans, whose mailing address is declared to be

1900 Gravier Street New Orleans, Louisiana 70112

and

Name of agency

(hereinafter referred to as "Affiliating Entity"), appearing through its authorized representative(s), whose mailing address is declared to be

Address of agency

WHEREAS, this Affiliation Agreement (hereinafter "Agreement") is desired in order to provide the Affiliating Entity and its Professional Staff with the intellectual stimulation that comes from the support of and the participation in a vigorous program of graduate and undergraduate clinical education, or community service, and the affiliation contemplated by this Agreement should improve and enhance the care of the sick; and

WHEREAS, in a like manner, University recognizes the unique opportunities for clinical education, or community service, in Affiliating Entity's facilities, which will permit opportunities for enhancement of the quality of the educational experience enjoyed by the University.

NOW THEREFORE, in consideration of the terms and conditions set forth herein, the parties agree as follows:

1. TERM

This Agreement shall be effective as of __date__ for an initial term ending __date__, and may be renewed thereafter with the prior written consent of both parties hereto.

PROVISION OF CLINICAL EDUCATION

The parties enter into this Agreement to establish a mechanism by which University Students shall participate in clinical education or community services at Affiliating Entity. Affiliating Entity shall accept Students assigned to Affiliating Entity by University, who shall be supervised by Affiliating Entity and if applicable, by University and, to observe and assist in various aspects of patient care. All participants in the educational or community service programs shall have a moral, ethical, and legal responsibility to the Affiliating Entity and the University for the responsible management of the care of patients.
2. AFFILIATING ENTITY OBLIGATIONS AND RESPONSIBILITIES

a. Affiliating Entity shall at all times retain ultimate control of the Affiliating Entity and responsibility for patient care.

b. Affiliating Entity shall designate, subject to the approval of University, a person to serve as a Liaison between Affiliating Entity and University.

c. Upon request of University, Affiliating Entity shall assist University in the evaluation of each Student’s performance in the clinical education program. However, University shall at all times remain solely responsible for the evaluation and grading of participating Students.

d. Affiliating Entity agrees, prior to the commencement of each rotation, to provide the Student assigned to Affiliating Entity with a general orientation to the Affiliating Entity. Each Student will be informed of appropriate Affiliating Entity rules, regulations, policies and procedures and of his or her obligation to abide by same.

e. Affiliating Entity may require the withdrawal of a Student if presence of the Student in Affiliating Entity’s facilities is disruptive or detrimental to Affiliating Entity’s operations or patients.

f. Affiliating Entity shall provide emergency care, at Student’s expense, in case of illness or accident to any participating Student.

g. Affiliating Entity shall permit Students and members of the University faculty connected with the educational program to use, at their own expense, any cafeteria or other dining facilities available to Affiliating Entity personnel.

h. Affiliating Entity shall maintain administrative and professional supervision of Students insofar as their presence and program assignments affect the operations of Affiliating Entity and its direct and indirect care of patients.

i. Affiliating Entity shall keep University informed of policy changes, which may affect University Faculty and/or Students.

j. Affiliating Entity shall comply with all applicable federal, state, and local laws, ordinances, rules and regulation; comply with all applicable requirements of any accreditation authority; and certify such compliance upon request by University.

3. UNIVERSITY OBLIGATIONS AND RESPONSIBILITIES

a. University agrees to provide Affiliating Entity with Course objectives and goals for students assigned to Affiliating Entity.

b. University shall select and assign for clinical experiences only those students who meet University requirements and qualifications and who agree to follow Affiliating Entity rules and regulations.

c. University shall designate a faculty member of the University who will coordinate the educational experience of the Students participating in the Program with the Affiliating Entity Liaison.

d. University shall provide a faculty member who will meet at least annually with the appropriate Affiliating Entity representative(s) to discuss and establish suitable clinical experience.

4. APPLICABLE LAW AND VENUE
This Agreement has been executed and delivered in and shall be interpreted, construed, and enforced pursuant to and in accordance with the laws of the State of Louisiana.

5. AUTHORIZED REPRESENTATIVE

Except as may be herein more specifically provided, University and Affiliating Entity shall act, with respect to all matters hereunder, through the Dean and ________________________.

6. USE OF NAMES

Affiliating Entity shall make no use of University's name(s) or logo(s) in print without prior written approval of authorized University representatives. Similarly, University shall make no use of Affiliating Entity's name(s) or logo(s) in print without prior written approval of Affiliating Entity, other than a joint public announcement of their affiliation. Notwithstanding the above, any Affiliating Entity professional may disclose to a patient that the patient will be seen by or treated by University who is providing Affiliating Entity services as an independent contractor and Affiliating Entity or University may at any time disclose affiliation with the other for informational purposes. When authority from University is necessary, it may be received from the Director of Information Services for University's Health Sciences Center – New Orleans. When authority from Affiliating Entity is necessary, it may be received from ________________________.

7. STUDENT HEALTH, CPR, OSHA

Prior to clinical education all students are required to have (and to show proof on site of):

a) Health insurance; (except that FACILITY shall provide emergency care at student's expense)
b) Hepatitis B vaccine (or signed waiver);
c) Negative TB/PPD skin test or Negative chest X-ray;
d) Current certification in CPR,
e) OSHA training in universal precautions.
f) Proof of MMR

8. INSURANCE

The University agrees to furnish the Affiliating Entity, upon request, a Certificate of Insurance providing evidence that University is covered for worker's compensation and general liability under the plan administered by the Louisiana State Office of Risk Management.

The Affiliating Entity agrees to furnish the University, upon request, a Certificate of Insurance providing evidence that the Affiliating Entity is covered by statutory worker's compensation coverage, employer's liability coverage and commercial general liability coverage with limits of liability of not less than $2,000,000.00 per occurrence.

Affiliating Entity warrants to the University that it and each of its employees, professional and nonprofessional, who is not, and is not acting as, a University Professional is, and shall remain during the term of this Agreement, either: (1) insured against all claims of professional liability under one or more policies of insurance with indemnity limits of not less than $500,000 per occurrence or claim; or (2) duly qualified and enrolled as a health care provider with the Louisiana Patient's Compensation Fund pursuant to the Louisiana Medical Malpractice Act, Louisiana Revised Statutes 40:1299.41, et seq.

University warrants that University and its Students providing services pursuant to this Agreement are provided professional liability coverage in accordance with the provisions of Louisiana Revised Statutes 40:1299.39, et seq., for the services to be provided pursuant to this Agreement. With respect to liability arising out of professional malpractice, the obligation of the University shall not exceed the amount payable by the State Health Care Provider Fund pursuant to the provisions of Louisiana Revised Statutes 40:1299.39, et seq.
University Students shall not be entitled to any employment benefits whatsoever from Affiliating Entity including, but not limited to, sick leave or the fringe benefits available to employees of the Affiliating Entity, and shall not be entitled to participate in any pension plan, life insurance, or any other compensation, welfare, or benefit plan maintained by Affiliating Entity.

9. STATUS OF UNIVERSITY PROFESSIONALS AND STUDENTS

University's services pursuant to this Agreement shall be as an independent contractor. University Students and other employees of University will be acting in the course and scope of their employment, appointment, or assignment for or on behalf of University, and shall not be entitled to receive or accept from Affiliating Entity any remuneration or other compensation whatsoever for services provided at the Affiliating Entity. It is expressly acknowledged and stipulated by University and Affiliating Entity that each University Student or employee assigned in any capacity to the Affiliating Entity pursuant to this Agreement is and shall be an employee or Student solely of University and shall not, for any purpose whatsoever, be or be considered an employee, representative, or agent of Affiliating Entity.

10. INDEMNIFICATION

University hereby agrees to hold harmless and indemnify Affiliating Entity from any claim, suit, or loss, other than expenses of litigation, sustained by Affiliating Entity, its officers, directors, or employees for any asserted injury to or death of any person to the extent that it results from or is caused by the asserted negligence, error, or omission of any University Student, employee, or agent. However, "agent" as used in this paragraph shall exclude any Affiliating Entity employee, or agent.

Likewise, Affiliating Entity hereby agrees to hold harmless and indemnify University from any claim, suit, or loss, other than expenses of litigation, sustained by University for any asserted injury to or death of any person to the extent that it results from or is caused by the asserted negligence, error, or omission of Affiliating Entity, or of its officers, directors, employees, or agents, or any other member of Affiliating Entity's Professional Staff. However "agent" as used in this paragraph shall exclude any University student, employee, or agent.

11. ACCESS TO RECORDS AND RECORD RETENTION

University and Affiliating Entity agree to retain this Agreement (including all amendments and Supplements hereto) and any of their books, documents, and records which may serve to verify the costs of this Agreement for the longer of six (6) years after the fiscal year in which the services contemplated herein have been performed or six (6) years after all reference value, audit, and/or litigation related to this Agreement is concluded or as otherwise required by law. All parties agree to allow the Secretary of the Department of Health and Human Services and the Comptroller General access to the Agreement, books, documents, and records in the event that such access is requested in writing and is made in accordance with applicable federal regulations. Furthermore, University's auditors and the Louisiana Legislative Auditor's office shall have the right upon reasonable written notice to inspect and audit, during Affiliating Entity's regular business hours and at no expense to Affiliating Entity, the books and records of Affiliating Entity, but only to the extent necessary to verify compliance with this Agreement.

12. CONFIDENTIALITY

To the extent allowed by law, University and its agents, students, or representatives agree to keep strictly confidential all confidential information of Affiliating Entity and/or Affiliating Entity's patients. All parties hereby agree that they shall comply with all applicable Federal and State laws, rules, and regulations which pertain to patient/client confidentiality, including the regulations implementing the Health Insurance Portability and Accountability Act of 1996, ("HIPAA"), 45 C.F.R. Parts 160 and 164 ("the Privacy Rule").
13. CIVIL RIGHTS

University and Affiliating Entity shall abide by the requirements of the following as applicable: Title VI and VII of the Civil Rights Act of 1964, as amended by the Equal Opportunity Act of 1972, Federal Executive Order 11246, the Federal Rehabilitation Act of 1973, as amended, the Vietnam Era Veteran's Readjustment Assistance Act of 1974, Title IX of the Education Amendments of 1972, the Age Act of 1975, and the requirements of the Americans with Disabilities Act of 1990.

University and Affiliating Entity agree not to discriminate in their employment practices, and will render services under this contract without regard to race, color, religion, sex, sexual orientation, national origin, veteran status, political affiliation, or disabilities.

Any act of discrimination committed by University or Affiliating Entity, or failure to comply with these statutory obligations when applicable, shall be grounds for termination of this contract.

14. USE OF PREMISES

University covenants not to use, or permit any University Student or other personnel of University acting within the Affiliating Entity to use, any part of the premises of Affiliating Entity for any purpose other than those purposes related to the performance of clinical services hereunder, unless otherwise mutually agreed to by the parties in writing.

15. ASSIGNMENT

This Agreement may be assigned only by the written consent of all parties; provided, however, that claims for money due or to become due to the University from Affiliating Entity under this Agreement may be assigned to a bank, trust company, or other financial institution without such approval. Notice of any such assignment or transfer by one party shall be furnished promptly to the other party.

16. AMENDMENT

This Agreement and amendments hereto shall be in writing and may be executed in multiple copies on behalf of Affiliating Entity by its authorized representative and on behalf of University by the Chancellor and the Dean. Each multiple executed copy shall be deemed an original, but all multiple copies together shall constitute one and the same instrument. Any understanding between the parties, whether oral or written, not formally denominated and executed as an amendment to this Agreement, which authorizes or approves any course of performance deviating from the terms hereof, shall be presumed to be a temporary waiver revocable at the will of any party and not an amendment of the provisions of this Agreement.

17. ENFORCEMENT

In the event either party resorts to legal action to enforce the terms and provisions of this Agreement, the party prevailing in such action shall be entitled to recover the cost of such action so incurred, including, without limitation, reasonable attorney's fees.

18. FORCE MAJEURE

Neither party shall be liable nor deemed to be in default for any delay or failure in performance under this Agreement or other interruption of service or employment resulting, directly or indirectly, from Acts of God, civil or military authority, acts of public enemy, war, accidents, fires, explosions, earthquakes, floods, failure of transportation, nonappropriation, strikes or other work interruptions by either party's employees, or any similar or dissimilar cause beyond the reasonable control of either party.

19. GENDER AND NUMBER

Whenever the context here requires, the gender of all words shall include the masculine, feminine, and neuter and the number of all words the singular and plural.
20. ADDITIONAL ASSURANCES

The provisions of this Agreement shall be self-operative and shall not require further Agreement by the parties except as may be herein specifically provided to the contrary.

21. SEVERABILITY

The invalidity or unenforceability of any terms or provisions hereof shall in no way affect the validity or enforcement of any other term provision.

22. ARTICLES AND OTHER HEADINGS

The paragraph and other headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

23. TIME OF ESSENCE

Time shall be of the essence with respect to this Agreement.

24. WAIVER OF BREACH

Neither payment nor lapse of time, nor any other act on the part of either party or its agents, shall constitute a waiver of any breach by said party of the conditions and covenants of this Agreement.

25. NOTICE

Whenever any notice or demand is required or permitted under this Agreement, such notice or demand shall be given in writing and delivered in person or by certified mail to the following addresses:

To University:
Chancellor Dean Louisiana State University Louisiana State University Health Sciences Center – New Orleans School of Allied Health Professions 433 Bolivar Street 1900 Gravier Street New Orleans, Louisiana 70112 New Orleans, Louisiana 70112

To Affiliating Entity:
Name of agency

26. ENTIRE AGREEMENT

This Agreement supersedes all previous contracts and constitutes the entire Agreement between the parties. Neither party shall be entitled to any benefits other than those specified herein. No oral statements or written material not specifically incorporated herein shall be of any force and effect and no changes in or additions to this Agreement shall be recognized unless incorporated herein by amendment as provided herein, such amendment(s) to become effective on the date stipulated in such amendments. Provided however, that any other language in this Agreement to the contrary notwithstanding, if there is an Exceptions Addendum, duly executed by all required authorities of the University and of the Affiliating Entity, appended to this Agreement, to the extent that the terms and conditions of said Exceptions Addendum vary from the terms or conditions of this Agreement, then the terms and/or conditions of the Exceptions Addendum shall prevail. There IS __ IS NOT ____ an Exceptions Addendum to this Agreement.

IN WITNESS WHEREOF, The parties execute this Agreement as of the date first above written.

UNIVERSITY: AFFILIATING ENTITY:
**Academic Fieldwork Coordinator (AFWC) Responsibilities**

As dictated by the 2011 ACOTE Standards, the AFWC will:

- Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design in collaboration with faculty so that fieldwork experiences strengthen the ties between didactic and fieldwork education.
- Document the criteria and process for selecting fieldwork sites, to include maintaining memoranda of understanding, complying with all site requirements, maintaining site objectives and site data, and communicating this information to students.
- Demonstrate that academic and fieldwork educators collaborate in establishing fieldwork objectives and communicate with the student and fieldwork educator about progress and performance during fieldwork.
- Ensure that the ratio of fieldwork educators to students enables proper supervision and the ability to provide frequent assessment of student progress in achieving stated fieldwork objectives.
- Ensure that fieldwork agreements are sufficient in scope and number to allow completion of graduation requirements in a timely manner in accordance with the policy adopted by the program as required by Standard A.4.14.
- The program must have evidence of valid memoranda of understanding in effect and signed by both parties at the time the student is completing the Level I or Level II fieldwork experience. (Electronic memoranda of understanding and signatures are acceptable.) Responsibilities of the sponsoring institution(s) and each fieldwork site must be clearly documented in the memorandum of understanding.
- Ensure that at least one fieldwork experience (either Level I or Level II) has as its focus psychological and social factors that influence engagement in occupation.

**LSUHSC – N.O. Occupational Therapy Program Responsibilities**

According to the 2011 ACOTE Standards, the program will:

- Ensure that the fieldwork experience is designed to promote clinical reasoning and reflective practice, to transmit the values and beliefs that enable ethical practice, and to develop professionalism and competence in career responsibilities.
- Provide Level II fieldwork in traditional and/or emerging settings, consistent with the curriculum design. In all settings, psychosocial factors influencing engagement in occupation must be understood and integrated for the development of client-centered, meaningful, occupation-based outcomes. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings.
- Require a minimum of 24 weeks’ full-time Level II fieldwork. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement’s
usual and customary personnel policies, as long as it is at least 50% of an FTE at that site.

- Ensure that the student is supervised by a currently licensed or otherwise regulated occupational therapist who has a minimum of 1 year full-time (or its equivalent) of practice experience subsequent to initial certification and who is adequately prepared to serve as a fieldwork educator. The supervising therapist may be engaged by the fieldwork site or by the educational program.

- Document a mechanism for evaluating the effectiveness of supervision (e.g., student evaluation of fieldwork) and for providing resources for enhancing supervision (e.g., materials on supervisory skills, continuing education opportunities, articles on theory and practice).

- Ensure that supervision provides protection of consumers and opportunities for appropriate role modeling of occupational therapy practice. Initially, supervision should be direct and then decrease to less direct supervision as appropriate for the setting, the severity of the client’s condition, and the ability of the student.

- Ensure that supervision provided in a setting where no occupational therapy services exist includes a documented plan for provision of occupational therapy services and supervision by a currently licensed or otherwise regulated occupational therapist with at least 3 years’ full-time or its equivalent of professional experience. Supervision must include a minimum of 8 hours of direct supervision each week of the fieldwork experience. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off site.

- Document mechanisms for requiring formal evaluation of student performance on Level II fieldwork (e.g., the AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student or equivalent).

- Ensure that students attending Level II fieldwork outside the United States are supervised by an occupational therapist who graduated from a program approved by the World Federation of Occupational Therapists and has 1 year of experience in practice.

**Fieldwork Site Responsibilities**

All FW sites utilized by the LSUHSC – New Orleans Occupational Therapy Department will be self-evaluated using the FW Essentials form. See Fieldwork Educators Manual.
Fieldwork Educator Clinical Education

1. Each Fieldwork Educator (FWE) will upload either verification from their state OT licensing body, or a copy of their state OT license to practice, on to LSUHSC’s CORE system. Expiration date will be checked by the AFWC prior to student placement (ACOTE C.1.14).

2. LSUHSC-N.O. will utilize the AOTA Fieldwork Data Form, and the LSUHSC-N.O. Credentialing Form on the CORE system, to ensure that each FWE has at least one years’ professional experience for traditional fieldwork site and at least three years’ experience in a setting where no OT services exist (ACOTE C.1.14; C.1.17).

3. LSUHSC-N.O. will ensure each FWE is ‘adequately prepared’ with the following order of preference for compliance: (ACOTE C.1.15; C.1.16)
   a. The FW Educator (FWE) has completed the AOTA Fieldwork Educator Certification program.
   b. The FWE has attended documented continuing education related to fieldwork supervision.
   c. The FWE has completed a self-assessment of skills using the AOTA Self-Assessment Tool for Fieldwork Educator Competency (SAFECOM).
   d. The FWE is at a facility that has a designated, experienced, Fieldwork Coordinator for FWE supervision and guidance.
   e. The FWE has read the LSUHSC-N.O. Fieldwork Educator Manual and has viewed the LSUHSC-N.O. power point presentation, Fieldwork 101: A Guide for Fieldwork Educators on the OT department website.
   f. The fieldwork site has indicated readiness of its FWEs on the AOTA Fieldwork Data Form (see Appendix F) and on the LSUHSC-N.O. Credentialing Form on the CORE system.

4. To ensure a quality fieldwork experience with adequate supervision, the AFWC will utilize the AOTA Fieldwork Data Form (see Appendix F), the Student Evaluation of the Fieldwork Experience (SEFWE, Appendix C), the LSUHSC-N.O. Department of OT’s Fieldwork Essentials form (see Appendix G), student feedback, verbal and e-mail communication with Fieldwork Site Coordinators and individual Fieldwork Educators, and site visits (ACOTE C.1.4; C.1.11; C.1.15).
Appendix I: AOTA Occupational Therapy Code of Ethics
Occupational Therapy Code of Ethics (2015)

Preamble

The 2015 Occupational Therapy Code of Ethics (Code) of the American Occupational Therapy Association (AOTA) is designed to reflect the dynamic nature of the profession, the evolving health care environment, and emerging technologies that can present potential ethical concerns in research, education, and practice. AOTA members are committed to promoting inclusion, participation, safety, and well-being for all recipients in various stages of life, health, and illness and to empowering all beneficiaries of service to meet their occupational needs. Recipients of services may be individuals, groups, families, organizations, communities, or populations (AOTA, 2014b).

The Code is an AOTA Official Document and a public statement tailored to address the most prevalent ethical concerns of the occupational therapy profession. It outlines Standards of Conduct the public can expect from those in the profession. It should be applied to all areas of occupational therapy and shared with relevant stakeholders to promote ethical conduct.

The Code serves two purposes:

1. It provides aspirational Core Values that guide members toward ethical courses of action in professional and volunteer roles, and

2. It delineates enforceable Principles and Standards of Conduct that apply to AOTA members.

Whereas the Code helps guide and define decision-making parameters, ethical action goes beyond rote compliance with these Principles and is a manifestation of moral character and mindful reflection. It is a commitment to benefit others, to virtuous practice of artistry and science, to genuinely good behaviors, and to noble acts of courage. Recognizing and resolving ethical issues is a systematic process that includes analysis of the complex dynamics of situations, weighing of consequences, making reasoned decisions, taking action, and reflecting on outcomes. Occupational therapy personnel, including students in occupational therapy programs, are expected to abide by the Principles and Standards of Conduct within this Code. Personnel roles include clinicians (e.g., direct service, consultation, administration); educators; researchers; entrepreneurs; business owners; and those in elected, appointed, or other professional volunteer service.

The process for addressing ethics violations by AOTA members (and associate members, where applicable) is outlined in the Code’s Enforcement Procedures (AOTA, 2014a).

Although the Code can be used in conjunction with licensure board regulations and laws that guide standards of practice, the Code is meant to be a free-standing document, guiding ethical dimensions of professional behavior; responsibility, practice, and decision making. This Code is not exhaustive; that is, the Principles and Standards of Conduct cannot address every possible situation. Therefore, before making complex ethical decisions that require further expertise, occupational therapy personnel should seek out resources to assist in resolving ethical issues not addressed in this document. Resources can include, but are not limited to, ethics committees,
ethics officers, the AOTA Ethics Commission or Ethics Program Manager, or an ethics consultant.

Core Values

The profession is grounded in seven long-standing Core Values: (1) Altruism, (2) Equality, (3) Freedom, (4) Justice, (5) Dignity, (6) Truth, and (7) Prudence. Altruism involves demonstrating concern for the welfare of others. Equality refers to treating all people impartially and free of bias. Freedom and personal choice are paramount in a profession in which the values and desires of the client guide our interventions. Justice expresses a state in which diverse communities are inclusive; diverse communities are organized and structured such that all members can function, flourish, and live a satisfactory life. Occupational therapy personnel, by virtue of the specific nature of the practice of occupational therapy, have a vested interest in addressing unjust inequities that limit opportunities for participation in society (Braveman & Bass-Haugen, 2009).

Inherent in the practice of occupational therapy is the promotion and preservation of the individuality and Dignity of the client, by treating him or her with respect in all interactions. In all situations, occupational therapy personnel must provide accurate information in oral, written, and electronic forms (Truth). Occupational therapy personnel use their clinical and ethical reasoning skills, sound judgment, and reflection to make decisions in professional and volunteer roles (Prudence).

The seven Core Values provide a foundation to guide occupational therapy personnel in their interactions with others. Although the Core Values are not themselves enforceable standards, they should be considered when determining the most ethical course of action.

Principles and Standards of Conduct

The Principles and Standards of Conduct that are enforceable for professional behavior include (1) Beneficence, (2) Nonmaleficence, (3) Autonomy, (4) Justice, (5) Veracity, and (6) Fidelity. Reflection on the historical foundations of occupational therapy and related professions resulted in the inclusion of Principles that are consistently referenced as a guideline for ethical decision making.

Beneficence

Principle 1. Occupational therapy personnel shall demonstrate a concern for the well-being and safety of the recipients of their services.

Beneficence includes all forms of action intended to benefit other persons. The term beneficence connotes acts of mercy, kindness, and charity (Beauchamp & Childress, 2013). Beneficence requires taking action by helping others, in other words, by promoting good, by preventing harm, and by removing harm. Examples of beneficence include protecting and defending the rights of others, preventing harm from occurring to others, removing conditions that will cause harm to others, helping persons with disabilities, and rescuing persons in danger (Beauchamp & Childress, 2013).
Related Standards of Conduct

Occupational therapy personnel shall

A. Provide appropriate evaluation and a plan of intervention for recipients of occupational therapy services specific to their needs.

B. Reevaluate and reassess recipients of service in a timely manner to determine whether goals are being achieved and whether intervention plans should be revised.

C. Use, to the extent possible, evaluation, planning, intervention techniques, assessments, and therapeutic equipment that are evidence based, current, and within the recognized scope of occupational therapy practice.

D. Ensure that all duties delegated to other occupational therapy personnel are congruent with credentials, qualifications, experience, competency, and scope of practice with respect to service delivery, supervision, fieldwork education, and research.

E. Provide occupational therapy services, including education and training, that are within each practitioner’s level of competence and scope of practice.

F. Take steps (e.g., continuing education, research, supervision, training) to ensure proficiency; use careful judgment, and weigh potential for harm when generally recognized standards do not exist in emerging technology or areas of practice.

G. Maintain competency by ongoing participation in education relevant to one’s practice area.

H. Terminate occupational therapy services in collaboration with the service recipient or responsible party when the services are no longer beneficial.

I. Refer to other providers when indicated by the needs of the client.

J. Conduct and disseminate research in accordance with currently accepted ethical guidelines and standards for the protection of research participants, including determination of potential risks and benefits.

Nonmaleficence

Principle 2. Occupational therapy personnel shall refrain from actions that cause harm.

Nonmaleficence “obligates us to abstain from causing harm to others” (Beauchamp & Childress, 2013, p. 150). The Principle of Nonmaleficence also includes an obligation to not impose risks of harm even if the potential risk is without malicious or harmful intent. This principle often is examined under the context of due care. The standard of due care “requires that the goals pursued justify the risks that must be imposed to achieve those goals” (Beauchamp & Childress, 2013, p. 154). For example, in occupational therapy practice, this standard applies to situations in which the client might feel pain from a treatment intervention; however, the acute pain is justified by potential longitudinal, evidence-based benefits of the treatment.

Related Standards of Conduct
Occupational therapy personnel shall

A. Avoid inflicting harm or injury to recipients of occupational therapy services, students, research participants, or employees.

B. Avoid abandoning the service recipient by facilitating appropriate transitions when unable to provide services for any reason.

C. Recognize and take appropriate action to remedy personal problems and limitations that might cause harm to recipients of service, colleagues, students, research participants, or others.

D. Avoid any undue influences that may impair practice and compromise the ability to safely and competently provide occupational therapy services, education, or research.

E. Address impaired practice and when necessary report to the appropriate authorities.

F. Avoid dual relationships, conflicts of interest, and situations in which a practitioner, educator, student, researcher, or employer is unable to maintain clear professional boundaries or objectivity.

G. Avoid engaging in sexual activity with a recipient of service, including the client’s family or significant other, student, research participant, or employee, while a professional relationship exists.

H. Avoid compromising rights or well-being of others based on arbitrary directives (e.g., unrealistic productivity expectations, falsification of documentation, inaccurate coding) by exercising professional judgment and critical analysis.

I. Avoid exploiting any relationship established as an occupational therapy clinician, educator, or researcher to further one’s own physical, emotional, financial, political, or business interests at the expense of recipients of services, students, research participants, employees, or colleagues.

J. Avoid bartering for services when there is the potential for exploitation and conflict of interest.

Autonomy

Principle 3. Occupational therapy personnel shall respect the right of the individual to self-determination, privacy, confidentiality, and consent.

The Principle of Autonomy expresses the concept that practitioners have a duty to treat the client according to the client’s desires, within the bounds of accepted standards of care, and to protect the client’s confidential information. Often, respect for Autonomy is referred to as the self-determination principle. However, respecting a person’s autonomy goes beyond acknowledging an individual as a mere agent and also acknowledges a person’s right “to hold views, to make choices, and to take actions based on [his or her] values and beliefs” (Beauchamp & Childress, 2013, p. 106). Individuals have the right to make a determination regarding care decisions that directly affect their lives. In the event that a person lacks decision-making capacity, his or her autonomy should be respected through involvement of an authorized agent or surrogate decision maker.
Related Standards of Conduct

Occupational therapy personnel shall

A. Respect and honor the expressed wishes of recipients of service.
B. Fully disclose the benefits, risks, and potential outcomes of any intervention; the personnel who will be providing the intervention; and any reasonable alternatives to the proposed intervention.
C. Obtain consent after disclosing appropriate information and answering any questions posed by the recipient of service or research participant to ensure voluntariness.
D. Establish a collaborative relationship with recipients of service and relevant stakeholders, to promote shared decision making.
E. Respect the client’s right to refuse occupational therapy services temporarily or permanently, even when that refusal has potential to result in poor outcomes.
F. Refrain from threatening, coercing, or deceiving clients to promote compliance with occupational therapy recommendations.
G. Respect a research participant’s right to withdraw from a research study without penalty.
H. Maintain the confidentiality of all verbal, written, electronic, augmentative, and nonverbal communications, in compliance with applicable laws, including all aspects of privacy laws and exceptions thereto (e.g., Health Insurance Portability and Accountability Act, Family Educational Rights and Privacy Act).
I. Display responsible conduct and discretion when engaging in social networking, including but not limited to refraining from posting protected health information.
J. Facilitate comprehension and address barriers to communication (e.g., aphasia; differences in language, literacy, culture) with the recipient of service (or responsible party), student, or research participant.

Justice

Principle 4. Occupational therapy personnel shall promote fairness and objectivity in the provision of occupational therapy services.

The Principle of Justice relates to the fair, equitable, and appropriate treatment of persons (Beauchamp & Childress, 2013). Occupational therapy personnel should relate in a respectful, fair, and impartial manner to individuals and groups with whom they interact. They should also respect the applicable laws and standards related to their area of practice. Justice requires the impartial consideration and consistent following of rules to generate unbiased decisions and promote fairness. As occupational therapy personnel, we work to uphold a society in which all individuals have an equitable opportunity to achieve occupational engagement as an essential component of their life.

Related Standards of Conduct
Occupational therapy personnel shall

A. Respond to requests for occupational therapy services (e.g., a referral) in a timely manner as determined by law, regulation, or policy.

B. Assist those in need of occupational therapy services to secure access through available means.

C. Address barriers in access to occupational therapy services by offering or referring clients to financial aid, charity care, or pro bono services within the parameters of organizational policies.

D. Advocate for changes to systems and policies that are discriminatory or unfairly limit or prevent access to occupational therapy services.

E. Maintain awareness of current laws and AOTA policies and Official Documents that apply to the profession of occupational therapy.

F. Inform employers, employees, colleagues, students, and researchers of applicable policies, laws, and Official Documents.

G. Hold requisite credentials for the occupational therapy services they provide in academic, research, physical, or virtual work settings.

H. Provide appropriate supervision in accordance with AOTA Official Documents and relevant laws, regulations, policies, procedures, standards, and guidelines.

I. Obtain all necessary approvals prior to initiating research activities.

J. Refrain from accepting gifts that would unduly influence the therapeutic relationship or have the potential to blur professional boundaries, and adhere to employer policies when offered gifts.

K. Report to appropriate authorities any acts in practice, education, and research that are unethical or illegal.

L. Collaborate with employers to formulate policies and procedures in compliance with legal, regulatory, and ethical standards and work to resolve any conflicts or inconsistencies.

M. Bill and collect fees legally and justly in a manner that is fair, reasonable, and commensurate with services delivered.

N. Ensure compliance with relevant laws and promote transparency when participating in a business arrangement as owner, stockholder, partner, or employee.

O. Ensure that documentation for reimbursement purposes is done in accordance with applicable laws, guidelines, and regulations.

P. Refrain from participating in any action resulting in unauthorized access to educational content or exams (including but not limited to sharing test questions, unauthorized use of or access to content or codes, or selling access or authorization codes).

Veracity
Principle 5. Occupational therapy personnel shall provide comprehensive, accurate, and objective information when representing the profession.

Veracity is based on the virtues of truthfulness, candor, and honesty. The Principle of Veracity refers to comprehensive, accurate, and objective transmission of information and includes fostering understanding of such information (Beauchamp & Childress, 2013). Veracity is based on respect owed to others, including but not limited to recipients of service, colleagues, students, researchers, and research participants.

In communicating with others, occupational therapy personnel implicitly promise to be truthful and not deceptive. When entering into a therapeutic or research relationship, the recipient of service or research participant has a right to accurate information. In addition, transmission of information is incomplete without also ensuring that the recipient or participant understands the information provided.

Concepts of veracity must be carefully balanced with other potentially competing ethical principles, cultural beliefs, and organizational policies. Veracity ultimately is valued as a means to establish trust and strengthen professional relationships. Therefore, adherence to the Principle of Veracity also requires thoughtful analysis of how full disclosure of information may affect outcomes.

Related Standards of Conduct

Occupational therapy personnel shall

A. Represent credentials, qualifications, education, experience, training, roles, duties, competence, contributions, and findings accurately in all forms of communication.

B. Refrain from using or participating in the use of any form of communication that contains false, fraudulent, deceptive, misleading, or unfair statements or claims.

C. Record and report in an accurate and timely manner and in accordance with applicable regulations all information related to professional or academic documentation and activities.

D. Identify and fully disclose to all appropriate persons errors or adverse events that compromise the safety of service recipients.

E. Ensure that all marketing and advertising are truthful, accurate, and carefully presented to avoid misleading recipients of service, research participants, or the public.

F. Describe the type and duration of occupational therapy services accurately in professional contracts, including the duties and responsibilities of all involved parties.

G. Be honest, fair, accurate, respectful, and timely in gathering and reporting fact-based information regarding employee job performance and student performance.

H. Give credit and recognition when using the ideas and work of others in written, oral, or electronic media (i.e., do not plagiarize).

I. Provide students with access to accurate information regarding educational requirements and academic policies and procedures relative to the occupational therapy program or educational institution.
J. Maintain privacy and truthfulness when utilizing telecommunication in delivery of occupational therapy services.

**Fidelity**

**Principle 6. Occupational therapy personnel shall treat clients, colleagues, and other professionals with respect, fairness, discretion, and integrity.**

The Principle of *Fidelity* comes from the Latin root *fidelis*, meaning loyal. *Fidelity* refers to the duty one has to keep a commitment once it is made (Veatch, Haddad, & English, 2010). In the health professions, this commitment refers to promises made between a provider and a client or patient based on an expectation of loyalty, staying with the patient in a time of need, and compliance with a code of ethics. These promises can be implied or explicit. The duty to disclose information that is potentially meaningful in making decisions is one obligation of the moral contract between provider and client or patient (Veatch et al., 2010).

Whereas respecting Fidelity requires occupational therapy personnel to meet the client’s reasonable expectations, the Principle also addresses maintaining respectful collegial and organizational relationships (Purtilo & Doherty, 2011). Professional relationships are greatly influenced by the complexity of the environment in which occupational therapy personnel work. Practitioners, educators, and researchers alike must consistently balance their duties to service recipients, students, research participants, and other professionals as well as to organizations that may influence decision making and professional practice.

**Related Standards of Conduct**

**Occupational therapy personnel shall**

A. Preserve, respect, and safeguard private information about employees, colleagues, and students unless otherwise mandated or permitted by relevant laws.

B. Address incompetent, disruptive, unethical, illegal, or impaired practice that jeopardizes the safety or well-being of others and team effectiveness.

C. Avoid conflicts of interest or conflicts of commitment in employment, volunteer roles, or research.

D. Avoid using one’s position (employee or volunteer) or knowledge gained from that position in such a manner as to give rise to real or perceived conflict of interest among the person, the employer, other AOTA members, or other organizations.

E. Be diligent stewards of human, financial, and material resources of their employers, and refrain from exploiting these resources for personal gain.

F. Refrain from verbal, physical, emotional, or sexual harassment of peers or colleagues.

G. Refrain from communication that is derogatory, intimidating, or disrespectful and that unduly discourages others from participating in professional dialogue.

H. Promote collaborative actions and communication as a member of interprofessional teams to facilitate quality care and safety for clients.
I. Respect the practices, competencies, roles, and responsibilities of their own and other professions to promote a collaborative environment reflective of interprofessional teams.

J. Use conflict resolution and internal and alternative dispute resolution resources as needed to resolve organizational and interpersonal conflicts, as well as perceived institutional ethics violations.

K. Abide by policies, procedures, and protocols when serving or acting on behalf of a professional organization or employer to fully and accurately represent the organization’s official and authorized positions.

L. Refrain from actions that reduce the public’s trust in occupational therapy.

M. Self-identify when personal, cultural, or religious values preclude, or are anticipated to negatively affect, the professional relationship or provision of services, while adhering to organizational policies when requesting an exemption from service to an individual or group on the basis of conflict of conscience.

References


Ethics Commission (EC)

Yvette Hachtel, JD, OTR/L, EC Chair (2013–2014)
Lea Cheyney Brandt, OTD, MA, OTR/L, EC Chair (2014–2015)
Ann Moody Ashe, MHS, OTR/L (2011–2014)
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Adopted by the Representative Assembly 2015AprilC3.

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Appendix J: LSUHSC Chancellor Memoranda and LSUHSC Links
Bylaws and Regulations of the Board of Supervisors for Louisiana State University and Agricultural and Mechanical College [http://www.lsuhsc.edu/administration/subscriptions/](http://www.lsuhsc.edu/administration/subscriptions/)

LSU System Permanent Memoranda [http://www.lsuhsc.edu/administration/pm/](http://www.lsuhsc.edu/administration/pm/)

LSUHSC-New Orleans Chancellor Memoranda [http://www.lsuhsc.edu/administration/cm/](http://www.lsuhsc.edu/administration/cm/)

Office of Compliance Programs [http://www.lsuhsc.edu/no/administration/ocp/](http://www.lsuhsc.edu/no/administration/ocp/)

LSUHSC Calendar – PM 5: [http://www.lsuhsc.edu/administration/pm/](http://www.lsuhsc.edu/administration/pm/)

SAHP Academic Calendar: [http://alliedhealth.lsuhsc.edu/Admin/academicaffairs.aspx](http://alliedhealth.lsuhsc.edu/Admin/academicaffairs.aspx)