



**Pacific Northwest**  
**University** of Health Sciences

# **SCHOOL OF OCCUPATIONAL THERAPY**

## **MASTER OF SCIENCE IN OCCUPATIONAL THERAPY PROGRAM**

**FIELDWORK EDUCATION HANDBOOK**

**2023-2024**

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# MASTER OF SCIENCE IN OCCUPATIONAL THERAPY PROGRAM FIELDWORK EDUCATION

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## MISSION

To prepare occupational therapists as leaders, scholars, and change agents who deliver occupation-based services that promote the health and well-being of rural and medically underserved communities throughout the Northwest and beyond.

## VISION

To be a leader in preparing occupational therapy professionals who revolutionize the health of rural and medically underserved communities.

## PROGRAM OF STUDY

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The Pacific Northwest University of Health Sciences (PNWU) Entry-Level Master of Science in Occupational Therapy (MSOT) program prepares students to become occupational therapists who promote health and well-being; who are leaders, advocates, change agents, and clinician-scholars in a rapidly changing and dynamic contemporary healthcare landscape; and who have the skills, passion, and commitment to serve rural and underserved populations.

## ENTRY-LEVEL MASTER OF SCIENCE IN OCCUPATIONAL THERAPY

The MSOT program is 72 credits and delivered across 6 semesters (two years of full-time study) and includes the completion of 24 weeks of full-time clinical experiences in the form of two-Level II Fieldwork rotations, each lasting 12 weeks. All didactic and clinical education requirements must be met prior to graduation. Level II fieldwork experiences occur upon completion of didactic studies.

Level II fieldwork must be completed within 24 months of finalized didactic coursework. Students who complete all degree requirements by the end of summer in the second year will graduate in mid-August. Upon graduation, students are eligible to sit for the National Board for Certification in Occupational Therapy (NBCOT) national certification exam.



## ACCREDITATION

Effective August 18<sup>th</sup>, 2022, the PNWU MSOT program was granted Candidacy status by the [Accreditation Council for Occupational Therapy Education](#) (ACOTE) of the [American Occupational Therapy Association](#) (AOTA). The entry-level MSOT program is seeking accreditation from ACOTE. As part of the process, the PNWU programs must have a pre-accreditation review (December 2024), complete an on-site evaluation (February-March 2025), and be granted Accreditation Status (April 2025) before graduates will be eligible to sit for the national certification examination for the occupational therapist administered by the NBCOT.

Graduation from an Occupational Therapist education program accredited by ACOTE is necessary for eligibility to sit for the [National Board for Certification in Occupational Therapy](#) (NBCOT) examination which is required for licensure and practice in each state. ACOTE will be scheduled to make an on-site visit prior to the graduation date of the inaugural class. Following that site visit, but before the program graduation date, ACOTE will render its decision regarding granting the program full accreditation status.

ACOTE is an accrediting agency that is nationally recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). ACOTE grants specialized accreditation status to qualified entry-level education programs for occupational therapists and occupational therapist assistants. ACOTE maintains a [complaint procedure](#) for issues involving program integrity after all remedies at the institution have been exhausted. The general contact information for ACOTE is:

Accreditation Council for Occupational Therapy Education  
6116 Executive Boulevard, Suite 200  
North Bethesda, MD 20852-4929  
(301) 652-6611  
[accred@aota.org](mailto:accred@aota.org)

## SCHOOL PHILOSOPHY, CURRICULAR THREADS AND PROGRAM OUTCOMES

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### PHILOSOPHY

See current [MSOT Student Handbook](#).

### VIEW ON HUMANS AND HOW THEY LEARN

See current [MSOT Student Handbook](#).

## EDUCATIONAL PHILOSOPHY

See current [MSOT Student Handbook](#).

## PNWU-SOT MSOT CURRICULAR THREADS AND PROGRAM OUTCOMES

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Though ACOTE determines the basic content to be covered in professional programs, the PNWU curriculum has been developed based on our mission, philosophy, the [Occupational Therapy Practice Framework: Domain and Process](#) (4<sup>th</sup> ed.; AOTA, 2020), and the pillars of the [AOTA 2025 Vision](#). The overarching program goals are presented below followed by six curricular threads, which guide and organize the curriculum.

## THE PNWU SOT PROGRAM OUTCOMES

Leaders, scholars, and change agents who deliver occupation-based services that promote the health and wellbeing of rural and medically underserved communities throughout the Northwest and beyond.

### We prepare graduates who:

Are Leaders, Scholars and Change Agents

- Demonstrate exemplary professionalism and add value to the interprofessional team.
- Lead and advocate to change policies, contexts, and systems that impact the profession and communities we serve.
- Synthesize best evidence and apply the principles of inquiry to inform clinical decision making.
- Provide socially responsive evidence-based and occupation-based services to rural and medically underserved areas.
- Practice in a socially responsive manner that is consistent with legal and ethical practice standards.

### Deliver occupation-based services to promote health and wellbeing

- Integrate knowledge of occupation and the biological, physical, and behavioral sciences necessary for entry-level occupational therapy practice.

- Apply the concepts of human action to the therapeutic process including the evaluation of action and the implementation of interventions that target the capacity for action.

## Experts in Occupation

Occupation is the defining concept of the profession and differentiates occupational therapy from other health professions. Occupations are the everyday, often taken-for-granted, activities in which one engages (i.e., what people ‘do’ with their time and energy). Occupations reflect and support one’s identity, sense of self and one’s connection to others and contexts, help individuals meet their basic needs, and help people flourish and live life to the fullest. Occupations are socially constructed, can be age normative, and are often patterned in everyday habits and routines. Occupations give one’s life personal meaning and value and are central to a person’s health, wellbeing, and life satisfaction. The PNWU MSOT curriculum is first and foremost designed to foster an in-depth understanding of occupation. Occupation is viewed as fundamental to human learning, development, and health, and as such, worthy of exploration. Building on a strong foundation in occupational science, students learn how to apply occupation therapeutically, as the means and/or ends of treatment with individuals, groups, communities, and populations. Key courses include Human Capacities I and II (OTH 500 and OTH 525); Introduction to Occupation and Occupational Therapy (OTH 510); Psychosocial Processes Across the Life Course (OTH 515); Environment, Technology, and Occupation (OTH 535); Occupation-based Interventions I, II, and III (OTH 530, OTH 550, and OTH 605); and Occupation-based Health Promotion and Chronic Condition Management (OTH 555).

## General Student Learning Outcomes:

1. Comprehend the complex, transactional, and socially constructed nature of occupations as they contribute to survival, health, and wellbeing across the life course.
2. Analyze occupations for the purpose of understanding the transactions between person, environment, and occupation, and the factors that promote or disrupt occupation for individuals, groups, communities, or populations.
3. Analyze a range of contexts and apply knowledge of persons, environments, and occupations, in ways that support performance and participation in occupation.
4. Synthesize information from the client’s occupational profile and apply insights for the purpose of client-centered intervention planning.

5. Demonstrate defensible clinical judgment and an ability to formulate, safely implement, adapt, and evaluate occupation-based interventions.

## Human Action

This theme addresses humans' capacity for action in the context of participating in and performing meaningful daily life activities throughout one's life. The ability to do what people want to do, need to do, and/or are expected to do is essential for meeting occupational needs, promoting self-actualization, and achieving health and wellbeing. Diseases, injuries, other health conditions, and environmental changes can lead to changes in one's capacity to participate in and perform occupations at their desired level of performance and satisfaction. These changes in the capacity for action can lead to long-term health problems and disability. To gain a better understanding of this phenomenon, human action is explored from anatomical, physiological, kinesiological, and behavioral perspectives. In addition, sociocultural and physical environmental contexts are examined to gain a better understanding of what people do, how they do it, and why. The idea of human action is reinforced throughout the curriculum. Courses that address this theme focus on understanding the underlying structures and system functions needed to support successful performance of meaningful activities. Courses also address the dynamic interrelationships between an individual's capacities for action, the demands of their occupations, and the constraints of their physical and sociocultural environments. This understanding is (1) leveraged in a way to enhance clients' capacities for action to meet, overcome, adapt to, and recover from the demands of their occupations; and (2) the foundation of knowing that informs a client-centered, individualized, and occupation-based therapeutic process. Key courses include Human Capacities I and II (OTH 500 and OTH 525); Introduction to Occupation and Occupational Therapy (OTH 510); Occupation-based Interventions I, II, and III (OTH 530, OTH 550, and OTH 605); and Occupation-based Health Promotion and Chronic Condition Management (OTH 555).

### General Student Learning Outcomes:

1. Comprehend how the transaction between physical, mental, and socioemotional structures, functions, and processes shapes the capacity for human action.
2. Apply knowledge of persons, environments, and occupations to foster human capacity for action across the life course.
3. Analyze changes in physical, mental, and socioemotional structures, functions, and processes that occur over the life course or due to illness or disability and their impact on occupational participation.

4. Evaluate the impact of changes in the capacity for action on occupation, identity, social connection, meaning-making, health, and wellbeing.

## Inquiry

This theme addresses inquiry as necessary to the advancement of the profession and as situated in the service of the communities in which we practice and live. The curriculum is designed to foster the practices of clinical and scientific inquiry, with the end goal of expanding knowledge of occupation and its translation to interventions that improve the lives of individuals, groups, communities, and populations. Inquiry is an iterative process of exploration, assessment, experimental application, and re-appraisal. Both clinical and scientific inquiry are fostered through understanding the scientific method, diverse research methodologies and ways of knowing, observations, and use of best evidence. In addition, inquiry is addressed as both an individual and social process that inherently involves persons and communities in addressing problems of health, wellness, and participation. The principles of inquiry are introduced and applied to both research and therapeutic practice. Although the concept of inquiry is reinforced throughout the curriculum, the Foundations of Inquiry I, II, and III (OTH 505, OTH 540, and OTH 615) courses provide students with more in-depth opportunities to synthesize and enact principles of inquiry.

### General Student Learning Outcomes:

1. Comprehend the process of inquiry in research, clinic practice, and everyday occupation.
2. Apply theories and evidence to inform clinical decision making.
3. Apply the principles of inquiry to research and clinical practice.
4. Comprehend the importance of developing habits of inquiry (lifelong learning, curiosity, practice) and the need to be a clinician scholar and contribute to building the professional evidence base.

## Health Promotion in Rural and Medically Underserved Communities

This theme addresses the role of occupational therapy practitioners in health promotion and disease/injury prevention, especially among rural and medically underserved populations. Coursework related to this theme addresses the need for occupational therapy professionals (1) to understand the contexts and conditions that shape health in

rural and medically underserved communities; (2) to understand the concepts of health disparities, social determinants of health, public and population health, and health promotion and disease prevention; and (3) to be equipped to develop programs and interventions that address social determinants of health and wellbeing and/or facilitate occupational performance and participation in ways that promote health and prevent disease. Health promotion in rural and medically underserved communities is reinforced throughout the curriculum, especially through the Introduction to Occupation and Occupational Therapy (OTH 510); Professional Seminar (OTH 520); Environment, Technology, and Occupation (OTH 535); Occupation-based Health Promotion and Chronic Condition Management (OTH 555); the non-traditional Level IC Fieldwork experiences (OTH 565); and OT Management and Entrepreneurship (OTH 610) courses.

### General Student Learning Outcomes:

1. Comprehend the historical, geographical, political, socioeconomic, demographic, and policy related factors that shape the health of rural and medically underserved communities.
2. Apply evidence-based models of rural healthcare delivery, health promotion, and disease prevention to address occupational needs in rural and medically underserved communities.
3. Analyze the contexts and conditions that shape health in rural and medically underserved communities.
4. Evaluate potential applications of occupational therapy to address health promotion and disease prevention needs in rural and medically underserved communities.

## Socially Responsive Practice

This theme addresses the importance of practicing in a manner that is equitable, inclusive, and upholds the dignity and rights of all individuals. The concepts of ethics, justice, and advocacy inform the PNWU SOT curriculum. Ethics refers to the values, motivation, and principles that shape behavior and practices. Justice refers to safeguarding human rights and equitable access to occupational participation, regardless of socioeconomic, demographic, or other factors. Advocacy refers to actions taken to defend, support, or promote the rights or positions of others and socially responsive practice. Through an occupational justice lens, coursework, interprofessional education (IPE) experiences, and hands-on experiences serve (1) to develop students' habits of thought and action relative to ethics, justice, and advocacy and, (2) to grow

students' confidence in applying those skills in a range of situations. Although ethics, justice, and advocacy are emphasized throughout the curriculum, the Introduction to Occupation and Occupational Therapy (OTH 510), Psychosocial Processes Across the Life Course (OTH 515), Professional Seminar (OTH 520), Occupation-Based Health Promotion and Chronic Condition Management (OTH 555), and Transition to Practice (OTH 620) courses provide students with more in-depth opportunities to understand and enact principles of ethics, justice, and advocacy.

### General Student Learning Outcomes:

1. Comprehend the role of ethics and advocacy in promoting socially just and responsive practice.
2. Analyze the equitable distribution of resources and access to occupation for individuals, groups, communities, and populations, especially in rural and MUAs.
3. Apply the principles of ethical and just practice as outlined by the [AOTA Professional Code of Ethics](#) and [Washington State Code of Ethics and Standards of Professional Conduct](#) to research activities, practice situations, and interactions with peers and community members.
4. Apply the principles of advocacy for the profession and the communities we serve.

## Leadership, Innovation, and Collaboration

This theme addresses the role of occupational therapy practitioners as leaders and change agents, their role on interprofessional (IPE) teams, and their dedication to collaborative and client-centered care. Coursework is focused on IPE, leadership skills, and skills needed to foster therapeutic use of self and collaborative client-provider interactions. Didactic coursework is augmented with community-based, experiential, and interprofessional learning opportunities in community and nontraditional settings and prepares students to (1) excel in interprofessional teams, (2) take on leadership roles, (3) engage in therapeutic relationships, (4) promote the distinct value of occupation and occupational therapy, (5) become good stewards of resources, and (6) advocate for political, social, and systems change. Leadership, innovation, and collaboration in practice is reinforced throughout the curriculum, especially through the Introduction to Occupation and Occupational Therapy (OTH 510), Professional Seminar (OTH 520), and Transition to Practice (OTH 620) courses and the Interprofessional Education Passport activities.

## General Student Learning Outcomes:

1. Comprehend different leadership and advocacy opportunities within the profession and modes of leadership and advocacy that lead to professional advancement and systems change.
2. Apply principles of leadership to optimally meet professional, societal, community, and individual needs.
3. Communicate and act in a professional, compassionate, and culturally sensitive manner in all encounters with clients, other professionals, and the general public.
4. Articulate the distinct value of occupation to clients, healthcare professionals, and the general public.

# INTRODUCTION AND OVERVIEW OF FIELDWORK EDUCATION

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Fieldwork education is a key component of the overall professional education of the student occupational therapist in the MSOT program at PNWU School of Occupational Therapy (SOT). The fieldwork education program is coordinated by the Director of Clinical Education (DCE), also known as the Academic Fieldwork Coordinator (AFC/AFWC), who assures quality fieldwork education experiences are assigned appropriately to enhance student learning and achieve outcomes. Fieldwork education experiences consist of Level I Fieldwork (FW-I) experiences embedded in the didactic coursework and full-time Level II Fieldwork (FW-II) experiences that occur after a student concludes the didactic curriculum. In total, there are 4 credit hours of Level I Fieldwork and 12 credit hours (24 weeks) of Level II Fieldwork.

The Level I Fieldwork (FW-I) experiences are designed to reflect the curriculum design and mission of the PNWU MSOT program with a focus on rural and medically underserved populations. The FW-I experiences support selective student participation through hands-on learning and application of the most recent didactic content and laboratory skills delivered in the curriculum. Level I Fieldwork placements begin during the second semester of the first year of the program with four total placements in semesters 2, 3, and 4.

Level II Fieldwork (FW-II) begins the spring semester of the second year in the program with placements scheduled during semesters 5 and 6. There are a total of two, Level II, 12-week FW-II placements. Level II FW placements are provided at established facilities with clinical affiliate agreements that have been deemed fieldwork education sites by the AFC/DCE. FW-II students are mentored and supervised by a qualified



occupational therapist, also known as a Fieldwork Educator (FWed). Fieldwork experiences provide students the opportunity to develop their OT practitioner identity, as well as knowledge and skills for entry-level practice. Each fieldwork experience builds upon prior academic and clinical knowledge to increase student readiness for the NBCOT board exam and entry-level practice.

SOT students are expected to be responsible for their education and professional behavior. Students are responsible for adhering to all SOT and University policies and procedures that affect academic progress. All policies and procedures are subject to change, and students are responsible for staying abreast of these changes. The [SOT Student Handbook](#) and *SOT Fieldwork Education Handbook* are updated annually and all MSOT students are expected to adhere to the policies and procedures in the most current editions of these handbooks.

## GOALS OF FIELDWORK EDUCATION

Students will:

- engage in self-directed learning through self/peer/FWed assessment and reflection,
- gain clinical experience which covers the life course in a variety of settings,
- implement didactic knowledge and skills learned in the classroom and labs to individuals, groups, and populations in a variety of practice settings and learning contexts to achieve entry-level practice,
- graduate as generalists who can thrive in a variety of occupational therapy settings, especially among rural and medically underserved areas/populations,
- establish the foundation for lifelong learning and utilization of evidence-based practice for professional reasoning.

## GLOSSARY OF TERMS

Note: The following terms are informed by the Accreditation Council for Occupational Therapy Education (ACOTE) 2018 Standards.

**Academic Fieldwork Coordinator (AFWC/AFC)/ Director of Clinical Education (DCE):** Academic faculty member who is responsible for the development, implementation, management, and evaluation of fieldwork education. The AFC/DCE serves as a resource for students, fieldwork educators, and faculty to plan and process outcomes of fieldwork experiences. The AFC/DCE provides orientation to students at

key intervals throughout their academic program and guides the entire fieldwork process.

**Academic Fieldwork Education:** Formal supervised experiential learning (hands-on experience) focused on the students' development and application of person-centered, occupation-centered skills and professional behaviors. It is designed so that students gain substantial, relevant clinical experience and skills to engage in contemporary practice and demonstrate entry-level, generalist competence by graduation. Skills, knowledge, and experience are acquired outside of the traditional academic classroom setting. Fieldwork education enables students to apply and attain professional/technical knowledge, skills, and behaviors within a variety of environments. Experiences include those of short and long duration, provide a variety of learning opportunities and include practice with clients, groups, and populations across the life course and settings. Although the emphasis is on occupational therapy practice, experiences may also include interprofessional experiences and non-client service delivery, such as program planning/development, research, teaching, supervision, and administration.

**AOTA:** The American Occupational Therapy Association (AOTA) is the national professional association established in 1917 to represent the interests and concerns of occupational therapy practitioners and students and improve the quality of occupational therapy services.

**AOTA Level I Fieldwork Competency Evaluation for OT Students:** An evaluation designed by AOTA for Level I Fieldwork placements. It is the mechanism by which fieldwork educators and students provide assessment and feedback on student fieldwork performance. Both the student and FWed electronically complete their own assessment and feedback, sign off on the feedback, and review it with each other.

**AOTA Level II Fieldwork Performance Evaluation for Occupational Therapists (FWPE):** A valid, standardized evaluation designed by the American Occupational Therapy Association (AOTA). It is the mechanism by which fieldwork educators and students provide assessment and feedback on student fieldwork performance. Both the student and FWed electronically complete their own assessment and feedback, sign off on the feedback, and review it with each other.

**AOTA Student Evaluation of the Fieldwork Experience (SEFWE):** An evaluation form created by the AOTA that is used to evaluate the fieldwork educator, fieldwork site, and the students' overall fieldwork experience. The student completes the SEFWE at the end of each Level II Fieldwork experience. The student and FWed review and discuss the results of this document which is provided through Formstack. A modified version of the SEFWE will be utilized for Level I Fieldwork rotations and submitted to Exxat.

**Center Coordinator of Clinical/Fieldwork Education (CCCE/CCFW):** These terms are used interchangeably with Site Coordinator of Clinical Education (SCCE) and other terms may exist depending on the site's fieldwork framework and work culture. The CCCE is an individual at a fieldwork site who administers, manages, and coordinates clinical assignments and learning activities for students during their fieldwork education experience. The CCCE determines the readiness of professionals to serve as a FWed for students, supervises FWeds in the delivery of fieldwork education experiences, communicates with the academic program regarding student performance and provides essential information to academic programs.

**Exxat Clinical Management System (Exxat):** A secure web-based application used by the PNWU SOT program to manage and store information related to clinical sites, student clinical placements, and more. Exxat includes an advanced matching system that facilitates matching students to clinical facilities according to each student's preferences, required clinical settings, and documented place(s) of residence. The PNWU program is currently operating in the Prism version of Exxat. Versions may change as the application evolves. Access to the web-based database is at <https://steps.exxat.com/>.

**Faculty Fieldwork Educator (Faculty FWed):** A licensed occupational therapist employed by PNWU who meets ACOTE qualifications and supervises students during practice within a Level I or Level II Fieldwork course.

**Fieldwork Education Site:** A healthcare organization/agency/community partner or other setting in which fieldwork education experiences are provided for student occupational therapists. The fieldwork education site may be, but is not limited to, a hospital, agency, clinic, office, school, community, or residential facility that is affiliated with PNWU through a clinical affiliate agreement.

**Fieldwork Educator (FWed):** An individual, typically a clinician, who works collaboratively with the program and is informed of the curriculum and fieldwork program design. The fieldwork educator serves as a role model and holds the requisite qualifications to provide student(s) with the opportunity to carry out professional responsibilities during fieldwork. The fieldwork educator is responsible for the student occupational therapist and directly instructs, guides, supervises and formally assesses the student during the fieldwork experience. Supervision is expected to move from direct to more student driven as the student occupational therapist progresses through the fieldwork experiences. A qualified Level II FWed must be a licensed occupational therapist with a minimum of one-year clinical experience post-licensure in their practice setting. Level II FWeds in settings where OT services do not exist must be currently licensed or otherwise regulated occupational therapist(s) with at least 3 years of full-time professional experience, or its equivalent, prior to the placement. Level I FWeds must be currently licensed or otherwise regulated professionals. Examples include, but are not

limited to, occupational therapists, occupational therapy assistants, psychologists, physician assistants, teachers, social workers, physicians, speech language pathologists, nurses, and physical therapists. Some fieldwork locations may refer to fieldwork educators as clinical instructors (CIs), supervisors, or preceptors depending on their fieldwork education framework and organizational culture.

**Formstack:** A web-based platform required by AOTA to distribute the FWPE and SEFWE forms. All official AOTA Level II Fieldwork forms must be processed through this system.

**Level I Fieldwork (FW-I):** A fieldwork experience in which students are introduced to fieldwork education, begin to apply their professional attitudes, knowledge, and skills to form their professional identities. Students explore the occupational needs of the client, group, and population by participating in select aspects of the OT process. Student occupational therapists should receive direct, structured supervision from an approved fieldwork educator. A cumulative minimum of 32 hours with a goal of 40 hours per rotation is expected. Level I fieldwork cannot be substituted for any part of Level II fieldwork.

**Level II Fieldwork (FW-II):** A fieldwork experience in which students apply their professional attitudes, knowledge, and skills in a variety of environments for a minimum of 24 full-time weeks. Rotations are 12-weeks in duration and scheduled sequentially. 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, if it is at least 50% of a full-time equivalent (FTE) at that site. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings. Supervision is provided by a licensed or otherwise regulated occupational therapist FWed with at least one year of practice experience.

**Master of Science in Occupational Therapy (MSOT):** The Entry-Level Master of Science in Occupational Therapy degree program for Occupational Therapists.

**Medically Underserved Area (MUA):** PNWU uses [Health Resources and Services Administration \(HRSA\) definition of MUA](#) which states these "are geographic areas where there is a shortage of health services." PNWU uses the [Rural Assistance Center online tool](#) for determining if an address is in a MUA.

**Medically Underserved Population (MUP):** PNWU uses [Health Resources and Services Administration \(HRSA\) definition of MUP](#) which states these "are groups of people with economic, cultural, or linguistic barriers to healthcare. The factors that influence an MUA/MUP designation include primary care physician-to-population ratio, infant mortality rate, poverty, and elderly population." This definition is found at:

<https://bhwh.hrsa.gov/workforce-shortage-areas/shortage-designation#mups>. PNWU uses the [Rural Assistance Center online tool](#) for determining if an MUP is at that location.

**Pacific Northwest University of Health Sciences (PNWU):** The University in which the School of Occupational Therapy is located, offering the MSOT program.

**Program Director (PD):** Designated administrator and academic leader of the School of Occupational Therapy and the MSOT program.

**ProgressIQ:** A web-based platform used to track student data from pre-admission through graduation. This program is used by faculty, advisors, and students as an academic advising tool. The program tracks students' progress towards meeting the program learning objectives. The students and their faculty academic advisor and DCE use ProgressIQ to monitor course activity, grades, and professional growth. ProgressIQ will also store clinical education faculty concerns and learning contracts.

**Rural:** PNWU uses the [U.S. Census Bureau definition of rural](#) which states "rural consists of all territory, population, and housing units located outside Urbanized Areas (UAs) and Urban Clusters (UCs)." PNWU uses this definition for student demographics and for determining if a clinical experience is rural. PNWU uses the [Rural Assistance Center online tool](#) for determining if an address is rural.

**School of Occupational Therapy (SOT):** Location of the MSOT program.

# MSOT PROGRAM PLAN OF STUDY AND COURSE DESCRIPTIONS

## MSOT Professional Curriculum

MSOT Professional Year 1		
Fall 2023	Spring 2024	Summer 2024 (10 weeks)
OTH 500 Human Capacities I (6 credits)	OTH 525 Human Capacities II (3 credits)	OTH 550 Occupation-based Interventions II: Adults (6 credits)
OTH 505 Foundations of Inquiry I (3 credits)	OTH 530 Occupation-based Interventions I: Infants, Children, and Adolescents (6 credits)	OTH 555 Occupation-based Health Promotion and Chronic Condition Management (3 credits)
OTH 510 Introduction to Occupation and Occupational Therapy (4 credits)	OTH 535 Environment, Technology, and Occupation (3 credits)	OTH 560 Level IB Fieldwork: Adults and Older Adults (1 credit)
OTH 515 Psychosocial Processes Across the Life Course (3 credits)	OTH 540 Foundations of Inquiry II (3 credits)	OTH 565 Level IC Fieldwork: Non- traditional (1 credit)
OTH 520 Professional Seminar (1 credit)	OTH 545 Level IA Fieldwork: Infants, Children, and Adolescents (1 credit)	
IPE Passport (0 credit hrs.). Complete a minimum 4 Passport Activities by end of Fall 2		
Total = 17	Total = 16	Total = 10
MSOT Professional Year 2		
Fall 2024	Spring 2025 (12 Weeks)	Summer 2025 (12 Weeks)
OTH 605 Occupation-based Interventions III: Older Adults (6 credits)	OTH 635 Level II Fieldwork A (6 credits)	OTH 640 Level II Fieldwork B (6 credits)
OTH 610 OT Management and Entrepreneurship (4 credits)		
OTH 615 Foundations of Inquiry III (3 credits)		
OTH 620 Transition to Practice (2 credits)		
OTH 625 Level ID Fieldwork: Mental Health (1 credit)		
Total = 17	Total = 6	Total = 6

**Total: 72 credits**

## COURSE DESCRIPTIONS

### Fall Semester, Year 1

**OTH 500 Human Capacities I (w/lab):** This course utilizes a top-down and bottom-up approach to address the structures, functions, and processes of the human body that support participation in and performance of various occupations. Student learning begins with an analysis of movement and documentation of meaningful activities and occupations using professional terminology from the *Occupational Therapy Practice Framework: Domain and Process* (4<sup>th</sup> ed.). Analysis of activity and occupation is followed by an examination of the functional movement patterns that underlie performance. Students continue by exploring the anatomical structures and functions of the musculoskeletal, peripheral nervous, integumentary, fascial, cardiopulmonary, and digestive systems that support occupation across the life course. Students also apply goniometry for the assessment of joint flexibility and apply manual muscle testing for assessment of isometric contraction. Knowledge generated through occupational analysis is then generalized to related occupations in a stepwise approach that gradually expands students' understanding of the transaction between client factors, activity demands, and contexts. Students learn through a combination of lectures and discussion, readings, case-based scenarios, small group activities, laboratory activities, and patient simulations. Formative and summative assessments are used to assess skills in occupational analysis, movement assessment, goniometry, manual muscle testing, knowledge of body structures and functions, and mastery of related course content. The course includes a lab. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

**OTH 505 Foundations of Inquiry I:** This course exposes students to the concept of the clinician-scholar and the process of inquiry in science and practice. Topics covered include principles of evidence-based practice, the scientific method, the structure and development of scientific literature, where and how to identify sources of evidence and how to critically evaluate sources of evidence. The course also introduces students to different qualitative and quantitative methodologies and research designs. Students learn through a combination of lectures and discussion, reflections, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

**OTH 510 Introduction to Occupation and Occupational Therapy:** This course provides an overview of the domain and process of occupational therapy practice as well as the history and philosophy of the profession and introduces students to the concept of occupation and occupational science. Through use of the official documents of the American Occupational Therapy Association, including the *Occupational Therapy Practice Framework: Domain and Process* (4<sup>th</sup> ed.), the *Occupational Therapy Code of Ethics*, and other evidence-based sources, students are introduced to practice definitions, the legal, ethical, fiscal, and regulatory factors that shape and guide

contemporary practice, requirements for credentialing and licensure, responsibilities for supervision of occupational therapy assistants and non-occupational therapy personnel, health policy, and payment and reimbursement systems. Theories, models, and frames of reference that support occupational therapy research and practice are also compared and applied to scenarios. This course includes a mandatory client-safety module covering universal safety precautions and personal protective equipment. Students also expand their understanding of occupational sciences through a semester-long exploration of an occupation common within rural communities. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, readings, case-based scenarios, small group activities, and interactions with community members. OTH 510 is a designated writing course. Students will practice and receive feedback on scholarly writing and American Psychological Association (APA) in the context of class assignments. Formative and summative assessments are used to assess mastery of course content. (4 credit hours)

**OTH 515 Psychosocial Processes Across the Life Course:** This course introduces students to frames of reference, theories, and models drawn from occupational therapy, psychology, sociology, anthropology, and the behavioral sciences to address psychosocial issues affecting participation in occupations and in society across the life course. Students explore the experiences of people living with mental health conditions, including the challenges they face engaging in occupation, participating in life situations, and accessing behavioral health care. Students are introduced to evaluation and intervention approaches to promote participation in daily life for individuals with psychosocial conditions. This course also introduces students to the basics of client-centered communication, therapeutic use of self, motivational interviewing techniques, and client advocacy. The course includes a lab which provides opportunities for students to practice and begin developing clinical skills in assessment, intervention planning, treatment strategies, documenting and billing of treatments and outcomes, and developing discharge, referral, and transition plans in practice with individuals with psychosocial conditions. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Formative and summative assessments are used to assess mastery of course content. (3 credits: 2 in-class didactic, 1 hands-on skills lab).

**OTH 520 Professional Seminar:** This seminar focuses on socially responsible practice. Students use an occupational justice lens to explore the needs of clients and the communities they serve, with an emphasis on rural and underserved communities. Students are introduced to the concepts of diversity, equity, inclusion, cultural responsiveness, effective communication, and occupational justice. Students interrogate multiple modes of advocacy for recipients of occupational therapy services, socially disadvantaged communities, and the profession and develop a deeper understanding of how advocacy efforts intersect with legislative and policy making processes. Students learn through a combination of lectures and discussion, readings, small group activities,



case-based scenarios, and applied civic engagement. Formative and summative assessments are used to assess mastery of course content. (1 credit hours)

**Interprofessional Education (IPE) Passport:** Students are required to complete a minimum of four learning events during the first four semesters of the program. The events are guided by the Interprofessional Education Collaborative (IPEC) core competencies and foster students' awareness of interprofessional education, collaboration and practice, the basic skills needed to be an effective part of an interprofessional team, their professional identity in the context of interprofessional teams, and professional responsibilities in such teams. Students also learn to articulate the distinct value of occupation and to become leaders who advocate for the profession and the individuals, communities, and populations served by occupational therapy. Students learn through interprofessional education activities. Formative and summative assessments are used to assess mastery of course content. (NC: required, no credit)

### **Spring Semester, Year 1**

**OTH 525 Human Capacities II (w/lab):** This course continues the work started in the Human Capacities I course. It addresses the structures, functions, and processes of the human body that support participation in occupation. Student learning begins with analysis and documentation of meaningful activities and occupations using professional terminology from the *Occupational Therapy Practice Framework: Domain and Process* (4<sup>th</sup> ed.). Analysis of activity and occupation is then linked to an exploration of the nervous system (with a focus on neurosensorimotor, neurocognitive, and neurobehavioral functions) and how those functions influence occupational performance and participation across the life course. Knowledge generated through occupational analysis and examination of anatomical structures is then generalized to related occupations in a stepwise approach that gradually expands students' understanding of the transaction between client factors, activity demands, and contexts. Students learn through a combination of lectures and discussion, readings, case-based scenarios, laboratory activities, small group activity, and standardized patient simulations. Formative and summative assessments are used to assess skills in occupational analysis, movement assessment, neurological and sensory assessment, and mastery of related course content. The course includes a lab. (3 credit hours: 2 in-class didactic, 1 hands-on skills lab)

**OTH 530 Occupation-based Interventions I (Infants, Children, and Adolescents):** This course provides students foundational knowledge of occupational engagement and human development in early life. Students interrogate the transactional relationship of capacities, personal factors, and contexts that shape occupations in early life. The course also introduces students to the most common mental and physical health conditions treated by occupational therapists in children and adolescents. Drawing on occupational science literature as well as literature from the biological sciences and

humanities, students explore the phenomenological experience of occupation, illness and disability for children, adolescents, and families. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. The course includes a lab that provides opportunities for students to begin developing clinical skills and implementing the occupational therapy process. Students learn through a combination of lectures and discussion, readings, reflections, small group activities, laboratory activities, interprofessional education activities, and standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

**OTH 535 Environment, Technology, and Occupation:** This course focuses on the environmental dimensions of occupational performance. Students examine a range of environmental and assistive technologies used in contemporary occupational therapy practice. Environments include, but are not limited to, home, school, work, community, and virtual environments. The course explores theoretical frameworks that influence the application of technology. Students develop clinical reasoning skills to assess the need for assistive technologies and design appropriate intervention strategies. A wide range of available technologies include, but are not limited to, user interfaces, information acquisition and communication, visual compensations, cognitive augmentation, organization and learning, electronic aids to daily living, and wheelchair handling and seating and positioning systems. Funding and letters of medical necessity related to technology acquisition are also covered. Students examine the transaction among environmental characteristics and occupational performance to adapt or modify environments to enhance performance and participation, including home safety assessment and home modifications. As part of the course, students complete required competencies in the use of telehealth in traditional and non-traditional settings. Students learn through a combination of lectures and discussion, laboratory and small group activities, case-based scenarios, and standardized patients. Formative and summative assessments are used to assess mastery of course content. (3 credit hours: 2 in-class didactic, 1 hands-on skills lab)

**OTH 540 Foundations of Inquiry II:** This course continues the work started in the Foundations of Inquiry I course. Each student will apply the principles of inquiry through developing an initial research question, conducting a literature search, and developing a research proposal, complete with a critical review of the literature. Students begin to learn and engage in the research processes by participating in faculty-led research. Students learn through a combination of lectures and discussion, reflective discussion, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

**OTH 545 Level IA Fieldwork (Infants, Children, and Adolescents):** This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process during a full-

time, one-week Level I Fieldwork experience. Students will participate in prebriefing and preparatory learning activities prior to the clinical experience, as well as debriefing after clinical experiences. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills, and clinical application of their knowledge into practice environments serving infants, children, and adolescents. Experiences may take place in a variety of settings (medical, educational, role emerging, non-traditional) and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

### **Summer, Year 1**

**OTH 550 Occupation-based Interventions II (Adults):** This course provides students foundational knowledge of occupational engagement and human development in adulthood. Theories of behavior are applied to age-normative occupations and roles and students critically interrogate differing representations of occupational engagement and role fulfillment in adulthood. The course also introduces students to the most common mental and physical health conditions treated by occupational therapists working with adults. The course includes a lab that provides opportunities for students to further develop clinical skills in assessment, intervention planning, treatment strategies, treatment modification, documenting and billing of treatments and outcomes, and developing discharge, referral, and transition plans with adults. Pharmacology is discussed in relation to specific conditions and the impact on the patient and therapeutic process. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussions, readings, reflections, small group activities, laboratory activities, interprofessional education activities, and standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

### **OTH 555 Occupation-based Health Promotion and Chronic Condition**

**Management:** This course introduces students to the role of occupation in public health, health promotion, and chronic physical and mental health condition management and prevention, especially among rural and medically underserved communities. Course content emphasizes key chronic conditions of the 21<sup>st</sup> century. Students inquire as to how historical, geographical, political, socioeconomic, demographic, and policy related factors shape health promotion and chronic condition management and health management occupations. Key concepts introduced in the course include, rurality, health disparities, social determinants of health, public and population health, health promotion, health education, health literacy, and health behavior. Theories of occupation and health behavior are introduced and interrogated. Evidence-based models of rural healthcare

delivery and health promotion and disease prevention are examined with an emphasis on applying concepts and models to develop individual, community, and population-based approaches for meeting the health needs of individuals and communities across the life course. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, reflective discussion, small group activities and community-based outings, and interactions with community members. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

**OTH 560 Level IB Fieldwork (Adults and Older Adults):** This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process during a full-time, one-week Level I Fieldwork experience. Students will participate in prebriefing and preparatory learning activities prior to the clinical experience, as well as debriefing after clinical experiences. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills and clinical application of their knowledge into adult and older adult practice environments. Experiences may take place in a variety of settings (medical, educational, role emerging, non-traditional) and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

**OTH 565 Level IC Fieldwork (Non-traditional):**

This course provides an opportunity for students to actively participate with faculty members and/or community partners in innovative community-based experiences that will improve the health needs of diverse, medically underserved, rural communities. Students will gain experience by examining how their professional skills may be harnessed to respond to public and population health needs of the community. Fieldwork experiences may take place in a variety of community and role-emerging settings across the life course, as well as simulation, reflection, preparatory activities, and community projects, to give students the means to apply learned content from previous and concurrent courses. This course will provide students with the opportunity to apply theories and evidence to program development and projects. (1 credit hour)

**Fall Semester, Year 2**

**OTH 605 Occupation-based Interventions III (Older Adults):** This course provides students foundational knowledge of occupational engagement and human development in older adulthood. Theories of aging are applied to age-normative occupations and roles and students critically interrogate differing representations of occupational engagement

and role fulfillment in later life. The course also introduces student to death and dying as well as the most common mental and physical health conditions that predominantly affect older adults. The course includes a lab that provides opportunities for students to further refine clinical skills in assessment, intervention planning, treatment strategies, documenting and billing of treatments and outcomes, and developing discharge, referral, and transition plans, including hospice and end of life care. Treatment of visual, perceptual, and cognitive dysfunction is especially emphasized as well as skills necessary to design interventions and programs that enhance community mobility, and support transportation transitions, including community access, driver rehabilitation, and driving cessation. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, readings, reflections, small group activities, laboratory activities, interprofessional education activities, standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

**OTH 610 OT Management and Entrepreneurship:** This course is designed to foster students' knowledge of the business aspects of occupational therapy service management, entrepreneurship, and community program development, including, but not limited to, ethics and advocacy in promoting socially just and responsive practice, the development of needs assessments, business plans, staffing plans and staff evaluation, financial management, marketing, program evaluation, and strategic planning. Students work with community stakeholders on a semester-long community program development project. As part of the project, students learn and apply the principles of teaching and learning and health literacy educational approaches to design activities, clinical trainings, and/or caregiver and stakeholder education for persons, groups, communities, and populations. The roles of key stakeholders and contextual factors on the delivery of occupational therapy services are emphasized. Students learn through a combination of lectures and discussion, small group activities, case-based scenarios, and face to face interactions with clients, service organizations, business owners, and representatives from the financial industry. Formative and summative assessments are used to assess mastery of course content. (4 credit hours)

**OTH 615 Foundations of Inquiry III:** In this course, students continue to learn habits of inquiry and the process of contributing to building the professional evidence base through continued engagement in the research processes. Students collect, analyze, and interpret data, prepare a poster to disseminate findings, and complete a final research paper. Different sources of funding for scholarly work are also discussed. Students learn through a combination of lectures and discussion, reflective discussion, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

**OTH 620 Transition to Practice:** This course focuses on (1) leadership, (2) supervisory and managerial roles and relationships, (3) professional development, and (4) transition to practice. Course topics include organizational leadership, leadership styles, effective communication and team dynamics, conflict resolution, and diversity, equity, and inclusion in the workplace. An emphasis is placed on exploring leadership opportunities within the profession, professional opportunities in the academy, and mode of advancing professional knowledge through CEU and advanced certifications. Course content also covers the transition to fieldwork, including criteria for evaluating student academic fieldwork performance, supervision issues, fieldwork experience responsibilities and job search. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, case-based scenarios, small group activities, and face to face interactions with clients and advocates. An emphasis is placed on developing habits of thought and action central to effective leadership. Formative assessments are used to assess mastery of course content. (2 credit hours)

**OTH 625 Level ID Fieldwork (Mental Health):** This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process with individuals, groups, and populations. The mental health rotation utilizes a blended approach of Level I fieldwork and structured learning activities, including simulation, to apply the OT process with emphasis on behavioral health and psychosocial factors. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills and clinical application of their knowledge into mental health practice environments. The fieldwork experience may take place in a variety of settings (medical, educational, role emerging, non-traditional) across the life course and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

### **Spring Semester, Year 2**

**OTH 635 Level II Fieldwork A:** The purpose of this Level II fieldwork experience is to provide students with an introduction to full-time occupational therapy practice within a treatment setting. Students gain experience in delivering occupational therapy services to individuals, groups, and populations across the life course in a variety of settings. This course allows application of previously learned skills and knowledge through clinical reasoning and reflective practice. Students will be prepared for entry-level practice in their assigned setting at the conclusion of the Level II fieldwork experience. (Part 1 of 2). (6 credit hours).

**Summer Year 2**

**OTH 640 Level II Fieldwork B:** The purpose of this Level II fieldwork experience is to provide students with an introduction to full-time occupational therapy practice within a treatment setting. Students gain experience in delivering occupational therapy services to individuals, groups, and populations across the life course in a variety of settings. This course allows application of previously learned skills and knowledge through clinical reasoning and reflective practice. Students will be prepared for entry-level practice in their assigned setting at the conclusion of the Level II fieldwork experience. (Part 2 of 2). (6 credit hours).

## FIELDWORK EDUCATION CURRICULUM

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### LEVEL I FIELDWORK COURSES

Year	Term	Semester	Course	Course Title	Credit Hours	Course Hours	Clinic Hours
1	Spring	2	OTH 545	Level IA Fieldwork: Infants, Children, and Adolescents	1	15	≥ 32
1	Summer	3	OTH 560	Level IB Fieldwork: Adults and Older Adults	1	15	≥ 32
1	Summer	3	OTH 565	Level IC Fieldwork: Non-traditional	1	15	≥ 32
2	Fall	4	OTH 630	Level ID Fieldwork: Mental Health	1	15	≥ 32
Totals					4	60	128

### LEVEL II FIELDWORK COURSES

Year	Term	Semester	Course	Course Title	Credit Hours	Course Contact	Clinic Hours
2	Spring	5	OTH 635	Level II Fieldwork A	6	90	480
2	Summer	6	OTH 640	Level II Fieldwork B	6	90	480
Totals					12	180	960

## DESCRIPTION OF LEVEL I FIELDWORK

Level I Fieldwork is an essential component of the PNWU curriculum design with a focus on the mission to serve rural and medically underserved communities across the life course in various fieldwork settings (e.g., medical, educational, role emerging, non-traditional). The fieldwork experience consists of preparatory learning activities prior to placement and debriefing afterwards to reflect on the experience. Students will apply theories and evidence to their clinical decision making, demonstrate professional behaviors and clinical application of their knowledge. Students are expected to become a part of interprofessional teams, develop their OT professional identity, and learn how to appropriately interact with individuals/groups/populations, families/support networks, caregivers, and professionals (including healthcare providers).

The curriculum design offers four Level I Fieldwork (FW-I) experiences during the didactic portion of the program.

- OTH 545 Level IA Fieldwork (Infants, Children, and Adolescents) – Spring 2024
  - Designed as a full-time, one-week rotation in a variety of practice settings that serve the target population. Student learning experiences focus on applying theory and models, developing an occupational profile, understanding how conditions/diagnoses impact occupational function and human action, and honing activity and occupational analysis skills.
- OTH 560 Level IB Fieldwork (Adults and Older Adults) – Summer 2024
  - Designed as a full-time, one-week rotation in a variety of practice settings that serve the target population. Student learning experiences focus on theory-driven assessment and intervention planning; utilizing evidence to inform intervention and discharge planning; and identifying supportive resources for individuals, groups, and populations.
- OTH 565 Level IC Fieldwork (Non-traditional) – Summer 2024
  - Designed as a 1-day a week integration throughout the semester in non-traditional, emerging practice settings. Student learning experiences focus on interprofessional collaboration to produce contextually relevant projects for health promotion, primary care, and prevention while using grassroots methods to cultivate community practice.
- OTH 625 Level ID Fieldwork (Mental Health) – Fall 2024
  - Designed as a blended rotation that integrates simulation and community fieldwork site visits throughout the semester. Student learning



experiences focus on the entire OT process through preparatory simulation (i.e., Simucase and/or standardized patients) and community fieldwork site visits to complete in-depth individual/group/population occupational profiles, assessments (as appropriate and available), and design occupation-centered interventions.

The Level I FW experiences are guided by the curricular threads and scheduled concurrently with didactic courses to reinforce classroom learning. Student occupational therapists should receive direct, structured supervision from an approved fieldwork educator. Participation may initially be limited, but the student should progress to increased participation as determined by the supervising fieldwork educator. Level I fieldwork does not emphasize independent performance, but rather establishing foundational skills and building one's OT identity for future Level II fieldwork placements. Level I fieldwork educators must be certified and/or licensed professionals, which can include, but not limited to, OTs, COTAs, teachers, PTs, PTAs, social workers, RNs, etc. There is no set amount of practice time required by ACOTE for FW-I educators, therefore mentorship and training for first-time fieldwork educators is strongly encouraged.

## **PNWU Level I Fieldwork Learning Objectives**

1. Apply knowledge of and demonstrate adherence to HIPAA guidelines, the AOTA Code of Ethics, and the OT Standards of Practice within the context of the fieldwork site.
2. Demonstrate sound judgment regarding safety of self and others by adhering to the fieldwork sites' safety regulations.
3. Demonstrate consistent professional behaviors including, but not limited to time management, organization, self-directed learning, communication, and use of professional terminology.
4. Describe the values and beliefs of OT to a range of stakeholders (i.e., service recipients, interprofessional team members, and client's support network).
5. Define the role of OT in relation to the fieldwork setting.
6. Identify and provide evidence that can inform OT practice at the fieldwork site.
7. Articulate the purpose of interprofessional collaboration and interpret how it is implemented at the fieldwork site (or could be implemented if it is not already established).

8. Identify the psychological and social influences on occupational performance of the client, group, and/or population, including values, beliefs, spirituality, and social factors.
9. Describe how social determinants of health influence the client, group, and/or population at the fieldwork site and identify actions that OTs can take to ensure these factors are being considered during the therapeutic process.

## **PNWU Level I Fieldwork Course Requirements**

1. American Occupational Therapy Association (AOTA) Level I Fieldwork Competency Evaluation for OT and OTA Students – completed by the student and fieldwork educator
2. Modified AOTA Student Evaluation of the Fieldwork Experience (SEFWE)
3. Full participation in and completion of pre-briefings, preparatory activities, reflections, and debriefings
4. Students must invest a minimum of 32 hours into the fieldwork experience. Hours include, but are not limited to direct client services, formal and informal learning experiences, development of in-services, projects, case studies, and/or evidence-based literature reviews/journal club. Hours are recorded on Exxat time sheets and sent to the AFC for approval.

## **DESCRIPTION OF LEVEL II FIELDWORK**

The MSOT program is 72 credits and delivered across six semesters (two years of full-time study) and includes the completion of 24 weeks of full-time fieldwork experiences in the form of two-Level II Fieldwork rotations, each lasting 12 weeks. Level II fieldwork experiences occur upon successful completion of didactic studies. Students must be in good academic and professional standing to participate in Level II Fieldwork. Fieldwork may be completed on a part-time basis if it is at least 50% of FTE at that site as required by ACOTE. Placements should not exceed 12 weeks; however, extensions may be needed on a case-by-case basis. Students who enter the MSOT program in the Fall are expected to graduate in Summer of the year in which all academic and fieldwork requirements have been met. Level II fieldwork must be completed within 24 months of finalized didactic coursework. Students who participate in Level II Fieldwork on a part-time basis have 200% of the completion time, so students must finish all didactic and fieldwork requirements in 4 years total after matriculating into the program. All didactic and fieldwork education requirements must be met to confer a student's degree.

The purpose of Level II fieldwork is to provide students with an introduction to full-time, entry-level occupational therapy practice. Students gain experience in delivering occupational therapy services to individuals, groups, and/or populations across the life course in a variety of settings. Students are assigned to a minimum of two different practice settings. Students must complete one rotation in physical rehabilitation and one in a special interest area (ex. mental health, burn rehab, hand therapy, neuro, and pediatrics). Students 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. Each student is strategically placed at a contracted fieldwork education site and is assigned by the facility CCCE to an appropriate FWed to meet the affiliation objectives. The entire process is managed and overseen by the AFC/DCE with critical input from the core faculty.

Students must be supervised by a registered and/or licensed occupational therapist with at least one-year of practice experience. For emerging practice areas where OT services do not exist, the student must receive supervision from an occupational therapist with at least three years of experience and a minimum of 8 hours of direct supervision per week. Students assigned to emerging practice area sites should have documented ability to be adaptive, effective with communication, organized, proactive, self-directed, and willingness to participate at a site that may have limited structure and supervision. An additional non-OT supervisor must be present and available to the student for support and consultation.

## Level II Fieldwork Learning Objectives

Upon completion of each Level II Fieldwork placement, students will demonstrate the attitudes, behaviors, knowledge, and skills for entry-level practice as occupational therapy practitioners in a wide variety of settings (i.e., medical, educational, community, and non-traditional).

At the completion of each Level II FW, the student(s) will demonstrate entry-level competency and ability to:

### I. Fundamentals of Practice

1. Ethically and professionally engage with all stakeholders (i.e., clients, families/support networks, colleagues, etc.) in accordance with the AOTA Code of Ethics and all federal, state, and facility regulations.
2. Safely conduct the therapy process with all stakeholders (i.e., clients, families/support networks, colleagues, etc.) per safety regulations and best practice.

## II. Basic Tenets

3. Effectively communicate the distinct value and roles of occupational therapy (OT) and occupations with all stakeholders (i.e., clients, families/support networks, colleagues, etc.)

## III. Screening and Evaluation

4. Utilize a person-centered, contextually, and culturally relevant screening and evaluation process grounded in theory and occupation-based practice.
5. Use robust, evidence-based methods to select appropriate screening and assessment tools and collect information from relevant resources (i.e., chart reviews, client interview).
6. Assess the psychological and social influences on occupational performance, including values, beliefs, spirituality, and social factors.
7. Prioritize client-centered, occupation-centered strategies to create a comprehensive and holistic occupational profile.
8. Proficiently administer standardized and non-standardized assessment tools that ensure valid and reliable results.
9. Accurately interpret evaluations to identify strengths and challenges for client/group/populations' occupational participation and performance.
10. Effectively synthesize and document the evaluation process.

## IV. Intervention

11. Develop client-centered and occupation-centered plans of intervention with measurable goals and objectives matched to the targeted outcomes and theoretical approaches from the evaluation process.
12. Use occupation during interventions that are matched to the client's goals and grades activities according to the client's needs and abilities.
13. Provide appropriate occupation-centered intervention to address psychosocial factors of the client, group, and/or population.
14. Instruct clients and family/support networks in home program/follow-up programs/use of appropriate assistive technologies.
15. Evaluate client outcomes, modify intervention plans as needed, and determine the need for continued service/discharge.
16. Competently document interventions and progress.

## V. Management of OT Services

17. Collaborate with the OTA and other OT support personnel whom responsibilities may be assigned (i.e., therapy techs/aides,

paraprofessionals, nurses' aides, and volunteers) in the provision of OT services, and demonstrate knowledge of the OT responsibilities for supervision.

18. Integrate knowledge of therapy costs, funding, and billing to productively meet practice standards.
19. Respond to the specific occupational therapy needs of rural and underserved communities.

## VI. Communication and Professional Behaviors

20. Respectfully and effectively communicate in a culturally responsive and professional manner, both verbally and nonverbally.
21. Document in a clear, accurate, and concise manner.
22. Assume responsibility for professional behavior and growth that includes, but not limited to active collaboration with supervisors and team, responding constructively to feedback, and maintaining therapeutic relationships with all stakeholders.
23. Demonstrate reliable, productive work behaviors with consistent time management and punctuality.
24. Respect and promote justice, equity, diversity, inclusion, and belonging of others.

## PNWU Level II Fieldwork Course Requirements

1. American Occupational Therapy Association (AOTA) Level II Fieldwork Performance Evaluation for OT Students – completed by the student and fieldwork educator on Formstack
2. Student Evaluation of the Fieldwork Experience (SEFWE) on Formstack
3. Full participation in and completion of assignments, pre-briefings/preparatory activities, reflections, in-services and projects for the fieldwork site, and debriefings
4. Students must invest a minimum of 480 hours (equivalent to 12 full-time weeks) into the fieldwork experience. Hours include, but are not limited to direct client services, formal and informal learning experiences, development of in-services, projects, case studies, and/or evidence-based literature reviews/journal club. Hours are recorded on Exxat time sheets and sent to the AFC/DCE for approval.

## Process

The Academic Fieldwork Coordinator (AFC/DCE), CCCE, and fieldwork educators collaborate to establish a schedule and learning objectives, determine an appropriate educator to student ratio, verify the educator(s) qualifications, and set the general expectations prior to the fieldwork experience. An email to confirm arrangements and expectations is sent to the facility in advance. Objectives and evaluations can be found in the course syllabi on Exxat and Moodle.

If there is no PNWU faculty member at the site, the on-site fieldwork educator has primary responsibility for advising the student during the fieldwork experience. Both fieldwork educators and students are encouraged to communicate with the AFC/DCE any time during the experience. Feedback is solicited from students and supervisors after each fieldwork experience. The feedback and recommendations are used to modify future experiences as needed.

Level I fieldwork cannot be substituted for any part of Level II fieldwork. Students cannot complete any fieldwork placement at sites where students have a personal relationship with an employee (i.e., family members, spouses, life partners) that would directly influence their fieldwork educator's evaluation or sites where they are currently or recently employed in the department in which they would be assigned. **Students may not solicit their own fieldwork placements.**

Sequence of Level II fieldwork placements will vary according to availability and fit for the student's learning needs. Students will have Level I and Level II Fieldwork placements both in-state and out-of-state. Every effort will be made to place students during the designated fieldwork terms; however, due to the availability of sites, students are not guaranteed contiguous fieldwork placements.

## STUDENT RESPONSIBILITIES FOR FIELDWORK EDUCATION

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### FIELDWORK EDUCATION ORIENTATION

Students are expected to attend all fieldwork classes that are provided by the AFC/DCE to understand and comply with the fieldwork education process. Students will be provided with an overview of the SOT Fieldwork Education Handbook and all necessary requirements/checklists for onboarding to fieldwork placements. Completion of all orientation checklists by the due dates will ensure timely, successful onboarding to fieldwork sites and effective communications with the fieldwork education sites/faculty/DCE. It is imperative for students to follow through to ensure a prompt start of fieldwork, to avoid delays in graduation, and ensure successful completion of all

course requirements to progress in the program. Students should refer to the SOT Fieldwork Education Handbook, course materials, and course syllabi for guidance before inquiring about any questions with the AFC/DCE. If at any point, the associated fieldwork education documents do not answer a question or resolve a concern, the student occupational therapist should contact the AFC/DCE.

## EXPENSES/TRANSPORTATION/LODGING

All costs related to fieldwork education are the student's responsibility (housing, travel/transportation, parking fees, meals, attire, other living expenses, site requirements, etc.). Students are expected to have reliable transportation and acquire housing on their own ahead of any fieldwork experience prior to the start date of fieldwork rotation. Students should expect a potential 90-minute drive to/from their place of residence to the fieldwork site. There are no guarantees a student will be placed near their local residence and in some cases, will be placed out-of-state to meet degree requirements. The AFC/DCE will attempt to respect student's personal commitments and desired site location, but often decisions must be made objectively. **Students should anticipate the financial impact of traveling and living out of town for most of their fieldwork placements. Students are expected to cover expenses incurred during all phases of fieldwork education.** Starting in 2025, stipends may be available to students whose commute or relocation is greater than 50+ miles from their rotation site.

## EXXAT STUDENT PROFILE, EMERGENCY CONTACT, AND SHARING OTHER INFORMATION

Prior to each fieldwork session, students will complete/update individual student information through the profile section in Exxat. The initial access to Exxat will require students to attest and acknowledge the information placed in Exxat can be viewed by assigned fieldwork education stakeholders from each site the student is placed. The Exxat profile includes each student's demographic information, photo, emergency contacts, learning style/feedback preferences, fieldwork education history (including pre-OT observation locations if applicable), fieldwork experience/course goals and objectives, and fieldwork requirements. Before the start of each fieldwork rotation, the clinical coordinators and fieldwork educators at the site will receive time-limited access to view the profile of their assigned student. It is the responsibility of the student to read the available affiliation agreement with the fieldwork site(s), state practice act, and any site-specific requirements on the site's profile (or provided by their fieldwork educators and CCCEs) to prepare for the fieldwork placement.

## SOT LIST OF REQUIRED DOCUMENTS AND GUIDELINES FOR STUDENTS

Requirements listed below may remain in good standing throughout fieldwork education experiences (items in [blue](#) have an expiration date). Additional documentation may vary depending on fieldwork site onboarding requirements.

## Health Info/Immunizations/Screens:

- Covid-19 Vaccine OR Exemption
- Hepatitis B & Titer
- Measles Mumps Rubella (MMR)
- [Tetanus, Diphtheria, Pertussis \(Tdap\)](#)
- [Tuberculosis \(TB\) Screen](#)
- Varicella (Chickenpox)
- [Health Insurance Card](#)

## Annual trainings:

- [Blood-Borne Pathogens Training Certificate](#)
- [HIPAA Training Certificate](#)
- [OSHA Training Certificate](#)
- [Title IX Training Certificate](#)

## One-time training:

- [Basic Life Support \(BLS\) CPR Certification](#) – may need to be renewed to keep certification active during [Level II Fieldwork](#)
- [IRB Training Certificate \(CITI\)](#)

## Background Check/Verifications:

- [Universal Background Check](#) – submit request in Exxat

## Others, only if requested by PNWU:

- Drug screen-10 panel
- Universal Employment Verification
- Universal Education Verification
- Universal Reference Verification
- Typhoid



*The remaining items are due at a later date (fall), and we will prompt you to complete when time:*

- Influenza/flu OR Exemption
- Covid-10 Training Certificate
- AOTA Membership

Some items may be required later, if a clinical site requires it (ex: COVID-19 Booster, Hepatitis A,

Meningococcal, Polio). Feel free to upload these if you have them.

## HEALTH INSURANCE

Please see PNWU's Student Health Care Coverage policy. All students must have health insurance at the time of matriculation and provide proof to Enrollment Services. The plan and carrier are the student's choice. A copy of the insurance coverage details/card should be uploaded to Exxat for site records as needed and should be updated by July 1, as coverage changes, or annually as the coverage/card renews. The student is responsible for paying all medical and emergency services, even when off campus at clinical education sites.

## HEALTH STATUS/PHYSICAL EXAMINATION/MINIMAL TECHNICAL STANDARDS OF THE MSOT STUDENT

A physical examination may be required by clinical education sites, and it is the responsibility of the student to complete, pay for, and share the results of that information with fieldwork sites via Exxat. If the student's health status should change (illness, injury, or condition) and it may affect their ability to participate in fieldwork education experiences, the student should notify Student Affairs and the DCE in writing, as an accommodations request may be needed, and professional and technical standards may need to be verified for continued participation. Please see the current Student Catalog (pg. 17) for the minimal technical standards of the MSOT Student.

## ACCOMMODATION

Please see PNWU's [Accommodation webpage](#) for specific procedures on filling out an application for accommodations. Any accommodation for special needs related to a disability or physical limitation needs to be arranged prior to the fieldwork placement. If a student feels an accommodation needs to be made, the DCE should be informed immediately, so options can be discussed for placement. The student must provide proof

of documentation of those needs and must be willing to release and disclose the information for accommodations directly to the fieldwork site. Fieldwork sites are not employers and as such, they offer accommodations on a voluntary basis. If the site is not able to fulfill these accommodations, another site will need to be coordinated by the DCE.

## Pregnancy

Student disclosure of pregnancy status to program personnel is strictly voluntary. While the SOT does not require that a pregnant student disclose their pregnancy, the SOT encourages any student who is pregnant, or may become pregnant, to discuss their attendance and participation in fieldwork with the DCE. More importantly, students should discuss their pregnancy, potential risks, and limitations with their physician. If a physician indicates that it is in their best interest not to participate in fieldwork, the student must contact Student Affairs to request an official/formal [accommodation](#) as soon as possible. Refer to the current Student Catalog (pg. 30-34) for further details regarding leave of absence procedures and continued program enrollment procedures.

## Counseling

Please see PNWU's [Counseling Services](#) and policy for Student Mental Health Services. To access counseling services, contact the providers directly via their email addresses which can be found on the [Counseling Services](#) webpage. Students are asked to schedule appointments at times that do not conflict with their classes or clinical training. However, the student may request permission from Student Affairs for an excused absence in order to meet with a Student Assistance Program counselor during scheduled activities. Such requests will be handled on a case-by-case basis and should be made as far in advance as possible.

## HIPAA TRAINING

Please see PNWU's [annual trainings](#) webpage for information on training related to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Students upload the training certificate of completion to Exxat each time training is completed. Students must also comply with the fieldwork site's policies regarding patient confidentiality and facility proprietary information and confidentiality. Further training may be required by the site.

**Patients/clients have a right to refuse to participate in clinical education.**

## BLOOD-BORNE PATHOGEN TRAINING

New students will complete an online Bloodborne Pathogen (BBP) training prior to matriculation and upload the certificate of completion to Exxat. Current students will complete the online Bloodborne Pathogen training prior to starting each academic year and upload the certificate of completion to Exxat.

Further BBP training may be required by a student's FW education site. Students must sign off in Exxat to acknowledge they understand there are associated risks for communicable disease (Hepatitis, HIV, etc.) while performing patient care as a student occupational therapist. See pages 69-71 for more information if BBP exposure occurs while on fieldwork.

## HAZARD COMMUNICATION (OSHA) TRAINING

Please see PNWU's [annual trainings](#) webpage. Students upload the training certificate of completion to Exxat each time training is completed. Further training may be required by the FW site.

## SEXUAL ASSAULT PREVENTION (TITLE IX) TRAINING

Please see PNWU's [Sexual Assault Prevention](#) training webpage. Students upload the training certificate of completion to Exxat each time training is completed. Refer to the same webpage as it relates to reporting of incidents regarding Title IX. Further information is also found in the SOT Fieldwork Education handbook section Equal Opportunity, Nondiscrimination and Harassment for reporting incidents.

## IMMUNIZATIONS

Student immunization/titer/vaccination records are located, maintained, and reviewed in Exxat. Records are reviewed by trained professionals via Exxat Approve and/or a PNWU immunization nurse. Students and DCE have access to submitted records within Exxat. Students should be aware that immunization records are required for fieldwork and should be prepared to present these records when requested. To make the records available to clinical education sites, students should load their immunization records to Exxat, per the instructions and include any applicable completion and/or expiration dates. A delay in immunizations/access to complete and verifiable records may delay the start of a FW placement.

Note: PNWU requirements meet those of regional hospitals and clinics and the Center for Disease Control health care worker general guidelines; fieldwork sites may require additional vaccinations or titers. The student is responsible for any additional cost and is

required to comply. Students will receive reminders through Exxat or Enrollment Services when immunizations need to be updated.

Please see PNWU's [Medical and Immunization Requirements](#) for sections related to Required Immunization/Vaccinations and Recommended Immunizations/Vaccinations. In addition, if the Measles Mumps and Rubella (MMR) is negative upon titer, it is the student's responsibility to notify their FW site prior to their rotation. Sites may require COVID-19 testing prior to or during the placement to avoid exposure to others in the healthcare facility. Students must comply with the fieldwork site requirements. Students are financially responsible for medical and immunization requirements.

Vaccination Exception: Students may request a vaccination exception for medical or religious reasons by submitting the [Student Vaccination Exception Request](#) form. The request will be reviewed by the PNWU immunization nurse, and the student will be notified of the decision and any follow up actions required. A lack of any immunization/titer or vaccination record may impact your placement in a clinical facility. Vaccine requirements and eligibility decisions are made by the individual fieldwork facility. If you are not able to complete requirements for FW experiences and unable to complete fieldwork, you may not be able to meet graduation requirements.

## TUBERCULOSIS SURVEILLANCE

Please see PNWU's [Medical and Immunization Requirements](#) for the section Tuberculosis Surveillance Requirements and Tuberculosis Screening Following International Travel. PNWU requires yearly tuberculosis (TB) exposure testing as recommended by the CDC as part of a general infection control program designed to ensure prompt detection and treatment of people who have suspected or confirmed TB disease. People who work or receive care in health care settings are at higher risk of becoming infected with TB.

Students may be required by their fieldwork site to have additional immunizations or tuberculosis screening.

Students must comply with these requests and pay for them at their own expense.

## DRUG SCREEN

Please see PNWU's [Drug Screening](#) webpage and the [Drug and Alcohol Policy](#). Placement at a fieldwork site may require additional drug screening and may require completion at site specific locations and times. Students must complete these requests in a timely manner in order to meet required completion dates and ensure a prompt clinical start date. If a FW site requires an updated drug screen and does not provide a procedure, the student will contact the DCE for instructions on completing a request for a drug screen via Exxat. A drug screen may be requested following the instructions in

Exxat in the Compliance section. The student is responsible to pay for any drug screening and site-specific screening requirements.

All drug screen results regardless of vendor should be uploaded to Exxat and provided to the necessary clinical education site personnel. Any adverse findings in the drug screen report should be reported to

PNWU Student Affairs and the chair of the Student Progress Committee (SPC) for review.

## **BASIC LIFE SUPPORT (BLS) CARDIOPULMONARY RESUSCITATION (CPR) TRAINING**

A certification of BLS CPR training for health care providers (with automated external defibrillator) is required of all students prior to starting the MSOT program and must be kept current throughout all fieldwork experiences. Students are required to provide proof of compliance by uploading documentation to Exxat. MSOT students may take the Basic Life Support (BLS) for health care providers through either the American Heart Association (i.e., HeartCode), American Red Cross, or American Safety & Health Institute. While many courses appear equivalent, the card must say BLS for Health Care Providers and have an in-person component to check-off CPR skills to be accepted by fieldwork sites. Student occupational therapists are responsible for maintaining active BLS CPR throughout Level II Fieldwork.

## **LIABILITY (MALPRACTICE) INSURANCE**

Please see PNWU's [Liability Insurance and Exposure Risks and Student Clinical Experiences Policy](#). PNWU students are covered with liability insurance only if the students are curricular learning experiences, including fieldwork rotations and service learning. Any non-curricular clinical experiences, whether observational or shadowing will not receive academic credit and will not be covered by PNWU's liability insurance. Students may not represent themselves as PNWU students in any way while participating in non-curricular clinical experiences.

If a student is aware of a potential legal liability situation, the dean of student affairs or designee and the DCE must be notified immediately. Progression of any legal liability action is to be detailed in writing by the student and regularly sent to the dean of student affairs or designee. A copy of the liability insurance certificate is maintained in Exxat and can be requested by emailing the DCE.

## AMERICAN OCCUPATIONAL THERAPY ASSOCIATION (AOTA) MEMBERSHIP

MSOT students belong to the next generation of occupational therapists. AOTA's resources will help student occupational therapists grow beyond the classroom. AOTA membership will provide access to journals, podcasts, scholarships, and helpful information as a student. Students are required to maintain membership in AOTA for the duration of the entire program (two years). The MSOT program purchases the AOTA membership on behalf of the students while enrolled in the program.

## AOTA LEVEL II FIELDWORK PERFORMANCE EVALUATION (FWPE) TRAINING

Students must complete training modules and review materials on the AOTA website and Moodle to use the AOTA Level II Fieldwork Performance Evaluation (FWPE). The FWPE facilitates self-assessment and records progress during the Level II Fieldwork placement. Students must pass the associated training exam with a score of 80% or greater. The certificate of completion should be uploaded to Exxat with the file name "FWPE Training Certificate." This training will occur as indicated by the DCE during the last didactic semester. Students will complete the FWPE online tool at midterm and final of FW-II, due as indicated in the FW-II course syllabus. Fieldwork educators will also be trained in Formstack and use of the FWPE to assess student's clinical performance during FW-II.

## CRIMINAL BACKGROUND CHECK

All MSOT students are required to complete a Criminal Background Check (CBC) prior to matriculation. If the fieldwork site requires an updated CBC, then the student will work with the fieldwork site and/or DCE to complete the CBC as required. Results of the CBC will be shared with clinical sites via upload to Exxat under the Compliance section. The student will assume the cost of background checks. Failure to meet any CBC requirements by the deadlines may result in a delay of fieldwork and/or graduation.

Notification from PNWU that a prospective student is denied enrollment, or a currently enrolled student is denied participation in a fieldwork experience due to CBC findings will be provided by certified letter and secure email to the student from Student Affairs. PNWU will review CBC findings with felony/misdemeanor charges for severity, frequency/pattern, time period, rehabilitation, unprofessional behavior, accountability, and outcome. The student should investigate possible consequences for future licensure.

The CBC search may include, but not be limited to, sources such as the following: Social Security Number Trace, Washington State Patrol Criminal Background check, Criminal

Histories Background check, Nationwide Wants & Warrants, HHS/OIG list of excluded individuals, GSA list of Parties Excluded from Federal Programs, Consumer Report information related to character, general reputation and credit that may be subject to the Fair Credit Reporting Act, Sex Offender Background check, Anti-Terrorism, and/or USA PATRIOT Act Sanctions.

See PNWU's [Student Conduct](#) webpage for CBC information and procedures for Challenging Results of the CBC.

## FINGERPRINTING

Additional background checks and/or finger printing, as required by clinical sites, may be requested and it is the responsibility of the student to complete these and pay for any associated fees. Failure to meet any CBC/finger printing requirements by the deadlines may result in a delay of fieldwork and/or graduation.

## CRIMINAL OR CIVIL CONVICTIONS

Please see PNWU's Criminal or Civil Convictions section of the [Student Conduct](#) webpage.

## STUDENT CONDUCT

Please see PNWU's [Student Conduct](#) webpage related to the ethical conduct policy, student rights and responsibilities policy, due process policy, PNWU honor code, student professionalism, student misconduct, communication, and netiquette.

## PROFESSIONAL BEHAVIORS EVALUATION

The SOT Professional Behaviors Evaluation will be completed throughout the didactic portion of the program and prior to starting FW-II rotations. This self-assessment provides an opportunity for self-reflection of the student's own behavioral criteria to meet professionalism standards. The form will be made available to the student occupational therapist as part of academic advising and should be turned in to and discussed with the student's faculty academic advisor. This information is stored in Progress IQ. Students are expected to show progress with each subsequent completion. The Professional Behavioral Evaluation will be utilized as part of the fieldwork matching process to ensure quality fit with the experiential learning environment.

## Student Conduct and Professionalism

MSOT students are expected to abide by the University's Student Professionalism Policy as well as the MSOT program-specific professional behavior and professional dress guidelines. Students who do not adhere to this policy may face corrective action.



## Professional Expectations as Members of AOTA

In addition to maintaining AOTA membership, while enrolled in the MSOT program, students should know, adopt, and uphold AOTA's ethical values:

- |             |             |
|-------------|-------------|
| 1. Altruism | 5. Dignity  |
| 2. Equality | 6. Truth    |
| 3. Freedom  | 7. Prudence |
| 4. Justice  |             |

Students will observe appropriate codes of conduct per the AOTA Code of Ethics as well as the appropriate state occupational therapy practice act in all interactions with academic and clinical education faculty, staff, students, employers, clients, families, and research subjects. This expectation includes conduct in off-campus personal or employment situations in which the student may potentially be in violation of these codes of conduct. The [AOTA Code of Ethics](#) can be found at the AOTA website.

## Professional Behavior Standards

Professional behaviors in occupational therapy refer to the qualities, characteristics, and manners of personal conduct that an individual possesses and demonstrates in ways that align with the ethical values, cornerstones, fundamental principles, and established standards of occupational therapy practice. The development, maintenance, and improvement of these behaviors are necessary to prepare students for successful entry into the profession and for developing ongoing professional competency and expertise. In addition, professional behaviors are generalizable to how one conducts themselves outside of the profession on the basis of self-improvement, making positive contributions to society, and enhancing personal relationships.

Please see [MSOT Student Handbook](#) (pg. 28) for full professional behavior standards.

## Professional Dress Standards

The student's attire must be clean, neat, and professional in appearance, safe, comfortable, nonbinding, and acceptable to fieldwork site coordinators and educators. Students on clinical rotations are expected to use good judgment and if there is a question as to the appropriateness of dress, the student should ask the fieldwork educator. Students are instructed to follow the dress code of the program and fieldwork site.



## ATTENDANCE

Attendance is required during all fieldwork experiences and students are expected to arrive on time or early on a regular basis. Students are expected to follow the FW educator's work schedule regarding hours worked (typically average 40 hours/week), including holidays and weekends. Expectations for scheduled hours should be clear and discussed at the beginning of the rotation. Any concerns should be brought to the attention of the DCE. Multiple days of tardiness and/or absences in any fieldwork rotation could result in referral to SPC.

- For all absences from **Level I Fieldwork**, the student must follow the rules outlined in the Attendance section of the [MSOT Student Handbook](#) on the PNWU website and/or the course syllabus. Students must submit the [Time Away Request](#) form in advance, when possible.
- For all absences from a **Level II Fieldwork**, the student must:
  - 1) Notify the FWed and/or CCCE prior to the beginning of the day. Students should establish preferred communication method (i.e., email, text, and/or phone call with FWed and/or CCCE at the beginning of the rotation. Include the reason for missing and a plan for returning to fieldwork.
  - 2) Notify the DCE at the beginning of the day via email (just cc on email to the FWed/CCCE).
  - 3) Submit a My Leave in Exxat for the specific fieldwork placement, which automatically notifies the DCE via email.
  - 4) Follow the guidelines below regarding make-up days:
    - For absence(s) due to illness/emergency: Students who miss FW hours due to illness or a family emergency will need to make up the hours in a way that fits the fieldwork site schedule.
    - For absence(s) due to inclement weather: Students are expected to exercise good judgment regarding safety. In the event of inclement weather, students are expected to adhere to the inclement weather policies of the assigned FW site. Therefore, the student is expected to make a reasonable effort to attend if the facility remains open. Students will NOT follow the inclement weather closings by the University during FW. The make-up policy regarding inclement weather is as follows:
      - If a student misses one day due to inclement weather and the facility was closed: The FWed and CCCE of the FW site will determine if the student is required to make up the hours. The decision to make up the hours should be based on the student's performance, the number of hours the student has already missed (if any), and overtime hours the student may have already worked/trained.

- If a student misses one day due to inclement weather and the facility was open: The FWed and CCCE of the FW site will determine when the student is required to make up the hours.
  - If a student misses more than one day due to inclement weather: All hours beyond one day (regardless of whether the facility was open or not) must be made up in a way that fits the clinical site/FWed schedule.
  - Absence(s) for any other reason: In general, non-emergency absences will not be approved. However, if a student must be absent for any reason other than illness, a family emergency, or inclement weather, the student must receive approval from the DCE beforehand. If the DCE deems the absence excusable, permission to be absent must next be granted from the FWed and/or CCCE at the facility. Any missed hours must be made up in a way that fits the clinical site/FWed schedule.
  - Jury Duty: A student selected for jury duty should contact Student Affairs and the DCE, if they wish to be excused. A letter will be provided for the student to submit to the judge. There is no guarantee that the student will be excused.
- 5) Expectations Outside of Clinic Hours: In order to be successful in fieldwork, students should also expect to prepare and/or follow up on clinic activities outside of set clinic/patient schedules. It is not unreasonable to spend a couple hours daily outside of the clinic to prepare for new patient diagnoses, treatments, research new evidence, or review/study.
- 6) Requesting Leave or Withdrawal: Please refer to the [MSOT Student Handbook](#). Student disclosure of pregnancy status to program personnel is strictly voluntary. Any student who is pregnant, or may become pregnant, is encouraged to discuss it with their advisor and DCE/Course Director as it relates to attendance/enrollment in fieldwork experiences. A student may consider options, including a request for an Accommodation or Medical Withdrawal.

## CONFLICT RESOLUTION

If a student feels the fieldwork experience is not meeting their educational needs for any reason, it is the student's responsibility to act. This applies even in situations in which the issue is perceived as a "personality conflict" between parties.

- Assistance in identifying and resolving the issue should first be sought from the FWed. If discussing the issue directly does not lead to a resolution, the student is encouraged to consult with the CCCE.

- Students, FWeds, and CCCEs are encouraged to contact the DCE at any time. The DCE can serve as an impartial third party who can serve as a mediator. If necessary, a site visit will be arranged with the individuals involved. In most cases, issues can be resolved either through mediation or via implementation of a negotiated Learning Contract (Appendix Q) that is mutually agreed upon by the FWed and/or CCCE, student, and the DCE. The DCE will support the FWed/CCCE and student in outlining clear behavioral and performance objectives. If a student is required to successfully complete a negotiated Learning Contract and does not, the FWed and/or CCCE can request termination of the experience. The DCE will then meet with the student to discuss remediation and reassignment if appropriate and the student will be referred to the Student Progress Committee (SPC).
- Appropriate records will be maintained in Exxat and/or Progress IQ for all concerns brought to the attention of the DCE during FW.

## STUDENT PROGRESS COMMITTEE

The Student Progress Committee (SPC) has the major responsibility of monitoring and enhancing student success. This committee meets a minimum of once per semester to review and report out on data pertaining to student success in professional behavior, academics, or in other matters that may negatively influence successful completion of the program.

## CHEATING AND PLAGIARISM

Refer to the [SOT Student Handbook](#) (pgs. 67-69) for all information pertaining to cheating and plagiarism.

## COMPLAINT PROCEDURES

The SOT program treats all student complaints seriously and is committed to ensuring that all complaints are resolved quickly, using a clear and fair process that is impartial and in the best interest of the parties.

If a student has a complaint, the recommended method of action is for the student to first attempt to informally resolve the issue at hand by themselves. If the result is unsatisfactory or the student does not feel comfortable addressing the problem, the student may contact their faculty academic advisor and/or the PD, depending on the seriousness of the complaint. Documentation or interviews with involved parties may be required in order to provide a resolution.

Students are encouraged to familiarize themselves with the [Reporting Suspected](#)

[Wrongful Conduct policy](#) and procedure or by using the [Complaint Regarding Ethical Misconduct or Lack of Professionalism form](#).

## FIELDWORK SITES, PLACEMENT, SETTING REQUIREMENTS

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### CONTRACTED FIELDWORK EDUCATION SITES

Each student is strategically placed at a clinical education site and assigned by the facility CCCE to an appropriate FWed to meet the course and site objectives. Each site has a contractual agreement with PNWU and the DCE maintains the contracts in Exxat. New sites are established by the DCE to meet the needs of PNWU, the program, and students. Clinical affiliate agreements describe the rights and the responsibilities of each component of the FW education process. These agreements, which are legally binding documents, must be in place prior to students beginning fieldwork. See Appendix B for a sample PNWU Clinical Internship Agreement. Please see Exxat for all specific site contracts. Students should review the details of their site-specific expectations in the contract prior to placement selection.

### AUTHORIZATION IN OTHER STATES

PNWU is a member of [NC-SARA](#) (National Council for State Authorization Reciprocity Agreements). This is a multi-state consortium that manages oversight of distance education, including fieldwork experiences in which students may engage outside of Washington State. PNWU seeks approval, authorization, or exemption to operate in other states as needed. PNWU students are eligible to participate in fieldwork in all states.

### NEW FIELDWORK EDUCATION SITE VISITS/ZOOM CONFERENCES/PHONE CALLS

Annually, the DCE or designated academic faculty will visit a group of fieldwork education sites with priority given to newly contracted sites, sites not used recently, or those sites with poor ratings and/or concerns identified from past student assessments. The DCE or academic faculty will visit each student at a fieldwork site at least once during the Program. Additional visits/calls will be completed as deemed necessary to promote successful completion of the placement, at any point during the fieldwork.

## Rotation Requirements and Student Rules for Site Selection

Students are advised to select fieldwork education sites that provide a range of experiences across the continuum of occupational therapy care and the life course to align with the outcomes and mission of the Program and promote readiness for their entry-level board exam and practice. The setting types and practice areas are as follows:

Curriculum & Program Requirements	Level I FW Requirements Spring Y1		Level I FW Requirements Summer Y1		Level I FW Requirements Fall Y2
At least one rotation (either FW-I or FW-II) in a Rural, MUA, or MUP designated area	Pediatrics	Setting type(s):	Setting type(s):	Setting type(s):	Setting type(s):
		<ul style="list-style-type: none"> <li>Early intervention</li> <li>Community organizations</li> <li>Hospital systems</li> <li>Outpatient clinics</li> <li>School systems</li> </ul>	<ul style="list-style-type: none"> <li>Community organizations</li> <li>Home health</li> <li>Hospital systems</li> <li>Outpatient clinics</li> <li>Older adult community living/adult daycare/residential programs</li> <li>Subacute/SNF/LTC/LTAC</li> </ul>	<ul style="list-style-type: none"> <li>Community organizations</li> <li>Older adult community living/adult daycare/memory care/residential programs</li> <li>Pro Bono Clinics/mobile clinics</li> <li>School systems</li> </ul>	<ul style="list-style-type: none"> <li>Community organizations</li> <li>Hospital systems</li> <li>Outpatient clinics</li> <li>Older adult community living/adult daycare/memory care/residential programs</li> <li>School systems</li> <li>Simulation &amp; virtual learning</li> </ul>
		Practice areas:	Practice areas:	Practice areas:	Practice areas:
		<ul style="list-style-type: none"> <li>General (most common)</li> <li>Educational</li> <li>Ortho</li> <li>Primary care/prevention</li> <li>Mental health/behavioral health</li> <li>Neuro</li> <li>Hippotherapy/equine-assisted therapy</li> </ul>	<ul style="list-style-type: none"> <li>General (most common)</li> <li>Hand therapy</li> <li>Medical model</li> <li>Ortho</li> <li>Primary care/prevention</li> <li>Neuro</li> </ul>	<ul style="list-style-type: none"> <li>Community</li> <li>General</li> <li>Primary care/prevention</li> <li>Mental health/behavioral health</li> <li>Hippotherapy/equine-assisted therapy</li> </ul>	<ul style="list-style-type: none"> <li>Community</li> <li>Educational</li> <li>General</li> <li>Hippotherapy/equine-assisted therapy</li> <li>Primary care/prevention</li> <li>Mental health/behavioral health</li> </ul>

Level II FW-A Requirements Spring Y2		Level II FW-A Descriptions
Physical Rehabilitation	Setting type(s):	<ul style="list-style-type: none"> <li>General or mixed IP/OP; CI practices in more than 1 setting type such as inpatient acute and outpatient general.</li> <li>Focused on the adult and older adult population but may have exposure to peds if rotating at a rural, general hospital that offers multiple settings.</li> <li>Students should consider diversifying experiences so if they rotate at an outpatient setting for FW-IB then choose a different setting/practice area for FW-II.</li> <li>*Some rotations, such as hand therapy, require additional vetting from the DCE for matching. Students should demonstrate exemplary performance in related content during coursework and past rotations for a successful match.</li> <li>Sites may require interviews and/or applications for placement.</li> </ul>
	<ul style="list-style-type: none"> <li>General</li> <li>Acute</li> <li>Home health</li> <li>Inpatient Rehab</li> <li>Outpatient</li> <li>Older adult community living/adult daycare/residential programs</li> <li>Subacute/SNF/LTC/LTAC</li> </ul>	
	Practice areas:	
Special Interest	<ul style="list-style-type: none"> <li>General (most common)</li> <li>Hand therapy*</li> <li>Medical model</li> <li>Ortho</li> <li>Primary care/prevention</li> <li>Neuro</li> </ul>	
Level II FW-B Requirements Summer Y2		Level II FW-B Descriptions
Special Interest	Setting type(s):	<ul style="list-style-type: none"> <li>Placements can take place across the life course pending on special interest identified by the student.</li> <li>Students should consider diversifying experiences for NBCOT exam and entry-level practice readiness.</li> <li>Students assigned to emerging practice area/non-traditional sites should have documented ability to be adaptive, effective with communication, organized, proactive, self-directed, and willingness to participate at a site that may have limited structure and supervision.</li> <li>*Some rotations, such as hand therapy, require additional vetting from the DCE for matching. Students should demonstrate exemplary performance in related content during coursework and past rotations for a successful match.</li> <li>Sites may require interviews and/or applications for placement.</li> </ul>
	<ul style="list-style-type: none"> <li>Geriatrics</li> <li>Hand Therapy</li> <li>Orthopedics</li> <li>Home Health</li> <li>Mental health/behavioral health</li> <li>Neuro Rehab</li> <li>Pediatrics</li> <li>Pelvic Health/Women's Health</li> <li>Primary Care</li> </ul>	
	Practice areas:	
Special Interest	<ul style="list-style-type: none"> <li>Community</li> <li>General</li> <li>Educational</li> <li>Ortho</li> <li>Primary care/prevention</li> <li>Mental health/behavioral health</li> <li>Neuro</li> </ul>	



## REQUIREMENTS AND STUDENT RULES FOR SITE SELECTION ROTATION

Students are advised to select fieldwork education sites that provide a range of experiences across the continuum of occupational therapy practice and the life course. Fieldwork experiences should align with the outcomes and mission of the Program and promote readiness for the entry-level board exam and practice. The setting types are as follows:

Students are required to complete at least one fieldwork in a location that is considered rural, an MUA or serves an MUP. Refer to the glossary of terms for descriptions and tools used by the DCE to determine if a location is rural, an MUA, or serves an MUP. Students must complete at least one rotation in a psychosocial setting per the ACOTE standards. Students must complete at least one Level II Fieldwork in a physical rehabilitation setting (i.e., acute care, skilled nursing facility, or outpatient) and at least one in a special interest setting and/or population (i.e., pediatrics, geriatrics, hand therapy, burn rehab). Other rules in determining an appropriate fieldwork site include the following:

Students may not be placed at a fieldwork site where they are currently or have been recently employed unless the setting type of the fieldwork is different and distinct from the employed setting type. For example, if employed in inpatient rehab, the student could not be assigned in inpatient rehab at that site but could be placed in outpatient orthopedics for fieldwork.

Students are not allowed to be placed where the student has a relative (grandparent, parent, sibling aunt/uncle or cousin) that is employed in the same Occupational Therapy or Rehabilitation Department.

The DCE reserves the right to make fieldwork assignments due to the special needs or circumstances of the student and to assure meeting Program requirements.

**Under *no circumstances* should a student contact a fieldwork education site or a CCCE to request or initiate a fieldwork experience.** Any contact with clinical sites is to be initiated by the DCE or designated academic faculty.

## SITE AVAILABILITY

PNWU has clinical education agreements with numerous facilities across the region and nationally. Placement requests are made annually to all fieldwork education sites with PNWU agreements. Sites receive a notice requesting a commitment for fieldwork reservations for the following calendar year. Based on information received from the sites, the students are presented with a list of available sites several months prior to the

start date of each fieldwork. Sites frequently affiliate with several academic programs. Therefore, sites may not always be available to accept students from PNWU for each fieldwork. **Students should never reach out to a site to request taking a student for a placement; coordination with all sites should be handled solely by the DCE and designated academic faculty/staff.**

The Exxat Student Profile is completed and submitted by the student occupational therapist as they begin to prepare for fieldwork placements. Since the student is responsible for all costs associated with fieldwork, it is in the best interest of the student and DCE to consider all housing/travel options available to the student to reduce the financial burden, when possible. The profile should be completed with this knowledge in mind after the student has brainstormed with family, friends, and acquaintances who may have options available for housing. The DCE will also use profile information to recruit and solicit fieldwork placements from desirable geographical areas and settings.

The DCE will work to align available fieldwork education sites with desired requests. Once the DCE feels the available list of clinical slots is sufficient, students will complete wish lists on Exxat for each fieldwork placement. Students can choose their top five choices and rank order them by preference. This will set the foundation for the official site placement process (see Site Placement Process section below) using Exxat.

## SITE PLACEMENT PROCESS

For each fieldwork, students are assigned to fieldwork education sites via a matching system using the Exxat online database. The matching process algorithm for assigning students to fieldwork education sites is designed to take into consideration students' preferences. A list of available fieldwork education sites and the designated occupational therapy setting type (e.g., outpatient, pediatrics, inpatient rehab, acute care, etc.) is provided to the students during the assignment process. Students are encouraged to research the available sites by reviewing the fieldwork site information available on Exxat and online searches. Staffing patterns, facility hours, types of patients treated, etc., may change and students should consider this when reviewing materials. In Exxat, students can select their "wish list" of sites for placement from the available list of slots for the FW. An algorithm built within Exxat will generate a tentative list of matched sites for each fieldwork for the student. The DCE reviews the auto-placements and determines final decisions for placement, in consultation with the PD and core faculty.

Sites/CCCEs acknowledge commitment and acceptance of the student placed at the site via email from Exxat.

Once fieldwork confirmation is received from the site, then students will acknowledge commitment and acceptance to the fieldwork site via Exxat, prior to contacting sites.

## Developing Current Fieldwork Sites and Educators



The Fieldwork Education Program continuously seeks to develop fieldwork education sites to provide students with the best possible fieldwork experiences. Feedback on sites and FWeds is completed in the SEFWE form completed by the student after each fieldwork placement and by academic faculty/DCE during midterm site visits. All sources of feedback are considered when determining the need for developing the site's fieldwork environment or the FWed's teaching effectiveness. Fieldwork education sites are developed in several different ways:

Individualized/one-on-one supervisor education sessions with the DCE or designated academic faculty

In-services provided at fieldwork sites upon request

AOTA Fieldwork Educator Certification workshops may be hosted by PNWU

Site visits are performed regularly to build rapport, consistency, and collaboration between current clinical education faculty and PNWU academic faculty.

### Acquiring New Sites and Handling Student Requests for New Sites

The CCCEs and DCE collaborate to ensure that new facilities meet the needs of the PNWU Fieldwork Education Program and meet the criteria as outlined by the ACOTE Standards. If the site meets the standards, a legal process is initiated to secure a clinical affiliation agreement between the University and the Facility.

Students are given opportunities to identify potential fieldwork education sites, especially those that are for out-of-state placements. The process of contracting a new site may take months and does not guarantee the site will be available for a particular fieldwork. New site recommendations are welcomed and should be brought to the attention of the DCE who will review the site information and initiate a contract if appropriate. **Students are not permitted to solicit their own placements or contact sites to initiate a fieldwork relationship.** New sites are vetted to ensure they are a good fit for maximum learning by the students of the SOT program. Considerations include:

- Fit with the mission and vision of PNWU and the SOT program
- Commitment to person-centered, occupation-centered practice
- Caseload composition, including volume and variety of conditions/diagnoses
- Variety of experiences available within each site
- Experience and qualifications of the fieldwork educators

- Opportunity for interprofessional interaction
- Opportunity for interaction with other students from other programs
- Opportunity for related educational opportunities (i.e., program development, surgery observations, courses, service/community involvement)

## Student Request for a Change in Fieldwork Placement

In general, once a fieldwork placement has been confirmed by the FW facility, it will not be changed. Both the OT program and fieldwork site must honor their commitment to prevent inconvenience to all concerned and to maintain respectful relationships for future placements. If problems arise that require special consideration, it is important to discuss them with the DCE as soon as possible. A student must petition to change or cancel a confirmed placement (see Student Request for Change in Fieldwork Placement form in [Appendix E](#)).

## Site Request to Cancel a Student Fieldwork Placement

On occasion, clinical sites may need to cancel a confirmed placement. When this occurs, the DCE will work to secure a new placement that fulfills the same type of fieldwork education as the cancelled site, but this cannot be guaranteed.

# ACADEMIC STANDARDS, GRADING, AND REMEDIATION

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## GRADING FOR LEVEL I FIELDWORK

Level I Fieldwork courses are graded for credit by the course director in consultation with the assigned FW educator for each student. Standards for grading student performance are identified in the corresponding syllabus available on Exxat and Moodle. The numerical rating scores and descriptions used are those defined in the [AOTA Level I Fieldwork Competency Evaluation](#) and detailed in the course syllabus for each FW-I. All assessment details for due dates and determining FW-I course grades are detailed in the corresponding course syllabus.

## Course Remediation for Level I FW

Students should be made aware of a lack of progress in the course or grading concerns by the FW educator and/or DCE as soon as identified. Assistance in identifying and resolving the concern(s) should first be sought from the student's assigned fieldwork

educator. If discussing the issue directly with the student does not lead to a resolution, the fieldwork educator should consult with the DCE. If concerns are still present after discussion with the DCE, a referral to the SPC will be made.

If a student does not receive a minimum course grade of B- for any FW-I course, the student will be referred to the SPC. Refer to the [SOT Student Handbook](#) for the remediation process details and the potential actions of the SPC. If remediation is not successful, a student may be dismissed from the program.

Appropriate records will be maintained in ProgressIQ and Exxat for all student or faculty concerns brought to the attention of the DCE.

## STUDENT READINESS FOR ENTRY INTO LEVEL II FIELDWORK

The SOT program is responsible for ensuring that student occupational therapists are prepared to provide safe and competent skilled care before entry into FW-II. Only students who are in satisfactory academic and professional standing may enroll in FW-II courses. Students on academic probation are not permitted to participate in FW-II.

### Assignments, Surveys and Midterm Visit Information for Level II Fieldwork

#### Assignments

Before, during and after each FW, students may also complete online modules, discussion boards, in-service presentations, site-specific projects, and professional plan written assignments. The terminal FW-II (OTH 640) will also include final approval of professional e-portfolios. Specific FW course syllabi contain the details of those assignments.

#### Student evaluation of the fieldwork experience on Formstack

The [Student Evaluation of the Fieldwork Experience \(SEFWE\)](#) (Appendix P) form will be completed by the student at the end of the fieldwork rotation in order to give the FWed and fieldwork education site feedback about their Level II Fieldwork experience. This type of information is important not only for curricular assessment and FWed/site development, but also provides opportunity for student self-reflection and growth. Please refer to the specific FW course syllabus for details on due date expectations and survey completion.

## Midterm Visit

The DCE or an assigned academic faculty will visit each student at a FW site at least one time during the program. Each student will receive a visit either on-site, by phone or Zoom. The standard visit/call will usually occur at the midterm point of the FW and will require documented discussion and feedback with the student and FWed, as well as the CCCE, if necessary. Students will be responsible for assuring a time/date has been scheduled with their designated academic faculty and FWed to complete the visit/call. Additional visits/calls will be completed at any point as deemed necessary to promote successful completion of the fieldwork. During the midterm visit, the DCE and/or assigned academic faculty will gather feedback on the fieldwork site environment, FWed's teaching effectiveness/supervision, and appropriateness of the fieldwork site in relation to the program's fieldwork education requirements.

## RIGHTS AND RESPONSIBILITIES OF FIELDWORK EDUCATION FACULTY

### Fieldwork Educator Qualifications

- The DCE works with the CCCE to ensure fieldwork educators:
- are licensed or otherwise regulated in their practice area and geographical area (for FW-II the FW educator must be a licensed occupational therapist)
- have a minimum of one-year clinical experience for FW-II placements and minimum of three years clinical experience for non-traditional FW-II placements
- demonstrate competence in the practice area they will provide fieldwork education
- demonstrate the ability to be effective educators, including the ability to assess and document student performance, including deficits and unsafe practices
- practice and maintain ethical principles and legal guidelines

### Supervision of Student Occupational Therapists

Student occupational therapists may not independently practice in the capacity of a licensed occupational therapist. For FW-II rotations, supervision by a licensed occupational therapist with at least one year of clinical experience must be provided to the student occupational therapist while providing direct care. For FW-II community/non-traditional rotations where an OT is not on-site, the supervising licensed OT must have at least three years of clinical experience, provide a minimum of 8-hours direct

supervision per week, and be readily available for student occupational therapist to contact. Direct supervision means the occupational therapist is physically present and immediately available for direction and supervision as defined by the AOTA.

Supervision must be aligned with federal and/or other state regulations, insurance regulations for reimbursement, state practice acts, and facility policies. Supervision should start off direct, then decreases to less direct supervision as appropriate for the setting, the complexity of the client's condition, and the ability of the student to support progression toward entry-level practice. For FW-I, a student may be supervised by any licensed or otherwise regulated professional validated through the Level I Fieldwork Collaboration form (Appendix F). The fieldwork education site and fieldwork educator(s) are responsible for ensuring patient's/client's right to refuse to participate in fieldwork education.

## **Expected Attendance of Student Occupational Therapists**

Attendance during fieldwork is mandatory for student occupational therapists. It is expected the student occupational therapist will follow the FW educator's work schedule, including holidays and weekends, and will work ~40 or more hours per week during a fieldwork. Expectations for scheduled hours should be clear and discussed at the beginning of the fieldwork. All student occupational therapist absences must be reported to the DCE. Refer to the Attendance section for specific details and procedures relating to planned and unplanned absences and make-up guidelines.

## **COMMUNICATION PRIOR TO, DURING, AND AFTER THE FIELDWORK EXPERIENCE**

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### **PRIOR TO THE FIELDWORK PLACEMENT**

Once a student is placed at the fieldwork education site, the student will accept placement via Exxat. The CCCE will then be notified to acknowledge commitment and acceptance of the student placed at the site via an email from Exxat.

Prior to arriving at the fieldwork education site, students are instructed to complete an online profile of their demographics, emergency contact information and desired learning objectives for the specific experience/setting type. This student profile information will be sent to the site/CCCE and/or assigned FWed for review. All fieldwork course syllabi, the SOT Fieldwork Education Handbook, student profiles, required forms, resources, and other pertinent information will be made available to the CCCE/FWeds in Exxat for convenient access. Students and FWeds are encouraged to contact each other via email or phone prior to the start of the fieldwork to discuss schedules, dress, contact information, parking, lunch, and any other site-specific expectations pertinent to the first

day. FWeds are encouraged to provide specific learning objectives and orientation upon the student's arrival.

## DURING THE LEVEL II FIELDWORK

Communication surveys will be distributed to the student and/or fieldwork educator during key weeks of the fieldwork experience to assess student progress and fieldwork supervision (see Appendices J - M). The DCE or an assigned academic faculty will plan either a site or Zoom/phone visit during the fieldwork. The visit typically occurs between Week 5 and 10. Students will need to discuss with their FW educator the time/date options for visits to accommodate the site/FWed schedule as much as possible. The DCE/assigned academic faculty will use the time to complete an assessment form to gather information on the FWed/site, the student occupational therapist, and the overall experience. It is important to have frequent discussions between the FWed and student to assure ongoing feedback and progress is occurring to maximize teaching, learning, and outcomes.

Although FWeds will complete the online FWPE (Appendix N) at the midterm and final to provide formal written feedback to the student, The student will have opportunities to provide feedback to their FW educator throughout the process through a Week 7 survey around midterm and an electronic version of the *Student Evaluation of the Fieldwork Experience* (SEFWE) (Appendix P) form to provide feedback to the FWed and site at the end of the rotation. A series of items will allow the student to rate the frequency and quality of FWed instruction/feedback at midterm and final, then provide other written feedback for the site/FWed at the final about the overall experience. Fieldwork educators are encouraged to contact the CCCE or DCE at any time for mentoring or improving educator effectiveness.

## FOLLOWING THE LEVEL II FIELDWORK

At the conclusion of the FW-II, FWeds will be asked to provide feedback to the PD, curriculum chair, and DCE via an electronic survey sent via email to the FWed. The survey will request feedback on the preparedness of the student to participate in the fieldwork experience and the effectiveness of the duties/responsibilities of the DCE. Timely responses will allow for necessary changes to be made within the SOT program/curriculum.

# FIELDWORK EDUCATOR EVALUATION OF STUDENT OCCUPATIONAL THERAPIST DURING FIELDWORK

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## LEVEL I FIELDWORK

For FW-I, refer to the course syllabus for due dates of required documents. Both the student and FWed complete their own feedback and provide comments and ratings on each required item of the AOTA Level I Fieldwork Competency Evaluation (Appendix G).

## LEVEL II FIELDWORK

Level II Fieldwork courses are graded pass/fail (P/F) and are assigned by the DCE in consultation with the FWed, CCCE, and other academic faculty as necessary. Standards for grading are detailed in the course syllabus for each placement.

For FW-II, FWeds and students should both provide feedback using the online AOTA FWPE (Appendix N) on Formstack. The midterm FWPE should be completed by the end of Week 6 and by the end of Week 12 of the fieldwork experience.

## Grading for Level II Fieldwork

Level II FW courses are graded pass/fail (P/F) and are assigned by the DCE in consultation with the FWed, CCCE, and other academic faculty as necessary. Standards for grading fieldwork performance are defined in the AOTA Level II Fieldwork Performance Evaluation for Occupational Therapy Students (FWPE) (Appendix N) and detailed in the course syllabus. Timely and successful completion of all assignments, electronic surveys and grading standards is imperative for a passing grade and completion of the FW-II. Any concerns regarding grading will be discussed with the student.

## REPORTING FOR LACK OF STUDENT PROGRESS AND/OR CONCERNS DURING FIELDWORK

The CCCE and student should contact the DCE immediately if:

- The FWed does not anticipate progress on each of the items' rating scales
- At the midterm of the FW-II and/or upon completion of the FWPE, if an item is marked as unsatisfactory performance

- Upon completion of the FW-I evaluation form, an item is marked unacceptable or below standards
- Initial discussions to resolve concerns regarding successful completion of the FW-I or FW-II do not provide resolution
- Any concerns related to unprofessional, unsafe, or unethical behaviors demonstrated by the student.

## FW-I

The student and the FWed should contact the DCE as soon as possible if there are concerns regarding ethics, safety, and professionalism as evidenced on the AOTA Level I Fieldwork Student Competency Evaluation (Appendix G). Students who receive an unacceptable or below standards score will need further remediation with the course director.

- For FW-I: Assistance in identifying and resolving the issue should first be sought from the student's assigned fieldwork educator. If discussing the issue directly does not lead to a resolution, the student and FWed need to consult with the course director/DCE. If concerns are still present after discussion with the course director/DCE, the SPC should be notified.
- Appropriate records will be maintained in Progress IQ for all student or FWed/CCCE concerns brought to the attention of the DCE.

## FW-II

If any problems or concerns develop during the fieldwork experience, it is the responsibility of the FWed to inform the student occupational therapist as soon as possible, both verbally and in writing. The FWed should address areas needing improvement and provide objectives with timeframes and specific levels of expectations to facilitate the students' improvement. The FWed should document how the situation or areas of concern are resolved. If the student is not able to meet the expectations within the timeframe, the FWed should document specific examples and immediately notify the DCE.

- For FW-II: These concerns should be addressed by the DCE (or other designated personnel) as soon as possible and a site/Zoom/phone visit will be scheduled with the applicable parties. In most cases, issues can be resolved either through mediation and a weekly planning form or via implementation of a Learning Contract (Appendix Q) that is mutually agreed upon by the fieldwork site (FWed and/or CCCE), student, and the DCE. The DCE will support the



FWed/CCCE and student in outlining clear behavioral and performance objectives. If a student does not successfully complete a required Learning Contract, the FWed and/or CCCE can request termination of the experience. The DCE will then meet with the student to discuss remediation and reassignment and the student will be referred to the SPC.

## COURSE REMEDIATION FOR LEVEL II FIELDWORK

The fieldwork educator and on-site coordinator should contact the DCE immediately if:

- a student receives a rating of unsatisfactory performance at the midterm of the FW-II and upon completion of the AOTA FWPE (Appendix N)
- FWed does not anticipate progress on each of the FWPE's rating scales
- initial discussions to resolve concerns regarding successful completion of the FW-II do not provide resolution.

If any problems or concerns develop during the fieldwork experience, it is the responsibility of the FWed to inform the student occupational therapist as soon as possible, both verbally and in writing. The FWed should address areas needing improvement and should provide objectives with timeframes and specific levels of expectations to facilitate the student's improvement. The FWed should document how the situation or areas of concern are resolved. If the student is not able to meet the expectations within the timeframe, the FWed should document specific examples and immediately notify the DCE. If possible, an email and a phone call should be made to the DCE.

These concerns will be promptly addressed by the DCE (or other designated personnel) through a consultation via site/Zoom/phone visit with the applicable parties. In most cases, issues can be resolved through a negotiated *Learning Contract* (Appendix Q) that is mutually agreed upon by the fieldwork site (FWed and/or CCCE), student, and the DCE. The DCE will support the FWed/CCCE and student in outlining clear behavioral and performance objectives. If a student is required to successfully complete a Learning Contract and does not, the FWed and/or CCCE can request termination of the experience. The DCE will meet with the student to discuss whether remediation and reassignment is the next best course of action, or if a grade of Fail and dismissal is warranted. The DCE will refer the student to the SPC for further assessment and recommendations.

If a student fails to meet the standards for Passing (P) on any portion of the FW-II course, the student will receive either a grade of In Progress (IP) or Fail (F). The SPC, in consultation with the student, DCE, and PD will develop a remediation plan if

appropriate, with input from the CCCE and FWEd. The options available to remediate with a passing grade may include, but are not limited to:

1. additional time at that fieldwork site or at another fieldwork site,
2. an additional fieldwork placement of appropriate length,
3. a successful remedial program followed by another fieldwork experience placement of appropriate length.

Any extra fieldwork rotation will be arranged by the DCE but arranging other placements/dates may depend on availability of sites and delay graduation until the student meets established criteria for fieldwork competence. A student with unsatisfactory fieldwork performance may be dismissed from the MSOT program.

The policies for repeating a course apply to FW-II courses:

- A student may repeat a FW-II course only once if they receive a grade of *In Progress (IP)*.
- A student who receives a grade of F will be dismissed from the program.

Each student should read the entire section concerning remediation found under the *Academic Warning, Probation, Remediation and Dismissal* section in the [SOT Student Handbook](#) (pgs. 57-67).

## OTHER SITUATIONS REQUIRING STUDENT AND/OR FWED/CCCE ACTION

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### EQUAL OPPORTUNITY, NONDISCRIMINATION, AND HARASSMENT

Please see PNWU's [Notice of Nondiscrimination](#) webpage. PNWU is an equal opportunity employer and makes employment and student application decisions based on merit. The University shall not discriminate against faculty, staff, volunteers, students, or applicants on the basis of race, ethnicity, color, sex, gender, religion, national origin, age, disabilities, sexual orientation, gender identity, marital status, or any other characteristic protected by law for any reason including recruitment, selection and promotion.

PNWU is also committed to compliance with the requirements of [Title IX](#) and, in accordance with those requirements, has adopted a policy of nondiscrimination on the

basis of sex in its educational programs or activities including admission to those programs or employment in those programs.

PNWU encourages reporting of all perceived incidents of harassment or discrimination. Reports may be made directly to the chief human resources officer and Title IX coordinator, 509.249.7714, [hr@pnwu.edu](mailto:hr@pnwu.edu), or using the [Title IX Report Form](#). PNWU will promptly and thoroughly investigate such reports. Retaliation against any individual who reports discrimination or harassment or participates in an investigation of such reports is prohibited.

## BLOOD-BORNE PATHOGEN EXPOSURE AND POSTEXPOSURE PROPHYLAXIS

### General

The Blood Borne Pathogen (BBP) procedure includes three components:

1. Education
  - a. Annually all PNWU students will complete an online Bloodborne Pathogens training on how pathogens are transmitted, practices that minimize the risk of exposure, what to do if there is an exposure incident, and how to handle and dispose of contaminated items.
2. Immediate post-mishap evaluation of exposure risk, as outlined by current Center for Disease Control and Prevention (CDC&P) guidance and recommendations.
  - a. BBP/HIV/AIDS Exposure
    - 1) Any PNWU student that has an incident involving exposure to another person's blood or body fluids or by injury caused by a sharp object or exposure to mucous membranes/skin-will take the following steps immediately:
  - b. Perform Basic First Aid
    - 1) IMMEDIATELY find the nearest wash station and clean the wound and skin with soap and running water.
    - 2) Flush eyes or any mucous membranes with large amounts of water or normal saline for several minutes.

- 3) Blood should be allowed to flow freely from the wound. Blood should not be squeezed or “milked” from the wound. Do not bleach or use abrasive soaps on your skin.
- c) IMMEDIATELY report your exposure incident to your supervisor, preceptor, or instructor since it can lead to infection with hepatitis B virus (HBV), hepatitis C virus (HCV), Human immunodeficiency virus (HIV) or other bloodborne pathogens.

## Appropriate follow-up

1. The goals of this procedure are to ensure the immediate cleansing of the exposure site, reporting of the incident, and when indicated, immediate appropriate post-exposure prophylactic treatment be started using CDC&P guidelines within two hours or less of the exposure and that appropriate laboratory work-up, counseling, and follow-up be provided.
2. Any PNWU student who has an occupational exposure to blood or other potentially infectious material (OPIM) will be immediately released from their student job responsibilities to go to the nearest hospital Emergency Room (ER), Occupational Health Clinic or their primary care provider (if they provide occupational health services) for post exposure evaluation, counseling, and/or necessary exposure treatment following the CDC’s National Institute of Occupational Safety and Health’s Bloodborne Infections Disease recommendations listed at: <https://www.cdc.gov/niosh/topics/bbp/default.html>.
3. As a student, you will be required to present your insurance card for submission for insurance coverage for your exposure evaluation.
4. Students in departments who work with blood or other potentially infectious material must be advised that they should notify their health insurance carriers of their academic activities involving Bloodborne pathogenic materials. The PNWU departments cannot assure students that they will fund post-exposure follow up procedure should the student become exposed to Bloodborne pathogens.
  - a. The goals of the student reporting to their ER, Occupational Health Clinic, or their primary care provider for BBP/HIV/AIDS exposure is to ensure:
    - i. A post-exposure evaluation, counseling, and so that any necessary treatment can begin.
    - ii. Post-exposure prophylaxis exists for HIV, HBV, and HBC, when medically indicated, would be offered to you according to the current recommendations. Post-exposure prophylaxis (PEP) is

an emergency medicine for people who are HIV negative and may have been exposed to HIV, it may be offered, and it should not be delayed waiting for test results, it should be started immediately. PEP antiretroviral therapy (ART) can be discontinued if the source test is negative. ART stops the progress to AIDS and reduces the risk of transmitting HIV, especially if treatment is administered right after exposure.

- iii. Post-exposure follow-up includes identifying the source individual and requesting consent to test and determining the source's HBV, HCV, and HIV infectivity status and the results of the source individual's testing should be made available to the exposed student through their treating physician. Your provider should inform you of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- iv. Testing is done at baseline, 6 weeks, 12 weeks, and 6 months after exposure.
- v. You should report for follow-up with your treating provider as post-exposure HIV/AIDS antibody testing is done at 6 weeks, 12 weeks, and 6 months and results checked.
- vi. Prescriptions should be obtained from your provider for the four-week drug regimen if needed.
- vii. To confirm appropriate blood work and follow-up is obtained from the student's primary care provider.
- viii. Once your medical evaluation has been completed, you will be required to complete the [Employee/Student Report of Injury form](#) and should describe the exposure event in as much detail as possible. The student is responsible for any costs incurred by these procedures and should ensure that their health care insurance provides coverage for such situations. While employers are responsible for post-exposure care for employees, students are not employees of PNWU or their clinical training sites and are therefore financially responsible for their care.

## RIGHTS AND RESPONSIBILITIES OF THE DIRECTOR OF CLINICAL EDUCATION

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The DCE develops, monitors, and enhances the fieldwork education component of the curriculum. The DCE manages student placement and success in all FW experiences.

The DCE's primary responsibilities are to plan, coordinate, facilitate, administer, and monitor activities on behalf of the academic program and in coordination with the program's Fieldwork Partners (contracted facilities, fieldwork education faculty). The DCE selects and evaluates fieldwork education sites and facilitates ongoing development of sites and fieldwork educators.

The DCE is responsible for coordinating and managing the efforts of the academic program and fieldwork education sites in preparing future occupational therapists through:

- Communication between PNWU and affiliated clinical education sites
- Fieldwork education program planning, implementation, and assessment
- Fieldwork site development
- Fieldwork educator development

## ADMINISTRATIVE RESPONSIBILITIES

Assist PD with ACOTE compliance and accreditation reports relative to the program's preparation and implementation of the fieldwork education curriculum, experiences, and activities, on and off campus

- Create relationships with external stakeholders to secure adequate fieldwork sites and fieldwork educators via contractual agreements; select clinical learning environments that demonstrate characteristics of sound person-centered care, ethical and professional behaviors, and currency with occupational therapy practice
- Develop and oversee policies and procedures related to fieldwork education; maintain Fieldwork Education Handbook; provide consistency with related sections of the Faculty and Student Handbooks; educate students, fieldwork site stakeholders, and academic faculty about fieldwork education requirements and standards to ensure compliance
- Prepare and provide appropriate full-time fieldwork slots and timely placement procedures, necessary student compliance requirements, related site-specific fieldwork requirements, and fieldwork database information
- Foster communication and development of FWeds at fieldwork sites and provide support and guidance to ensure student learning and progression

- Monitor, evaluate and refine the SOT curriculum in collaboration with other SOT core faculty; participate in Curriculum and Outcomes Committees; collect and evaluate FWPE and SEFWE reports
- Work closely with PNWU's Simulation Center Coordinator and Interprofessional Education faculty to develop fieldwork simulations according to ACOTE standards
- Evaluate student performance, in cooperation with other faculty, to determine their ability to integrate didactic and experiential learning experiences and to progress within the curriculum; facilitate quality learning experiences for students during fieldwork education
- Maintain active membership in AOTA and participate in the AOTA Academic Leadership Council

## INFORMATION RESOURCES

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Please refer to the current [Student Catalog](#) or the [PNWU Policies Library](#) for all student-related policies. The [PNWU.edu](#) website is a resource for all the latest news, University calendar, forms, directory, and links to other important information. The student handbook is a compilation of procedures and guidelines that provide the framework of expectations for academic performance, conduct, behavior, and professionalism as a student at PNWU.

# APPENDIX A

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## AOTA DATA FORM 2020



[aota.org](https://aota.org)

## 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, 4th Edition* (American Occupational Therapy Association [AOTA], 2020) 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 academic 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, 2018). The standards are outlined in Section C of the 2018 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:**

<b>FW I</b> <b>Contact Person:</b> _____ <b>Credentials:</b> _____ <b>Phone:</b> _____ <b>Email:</b> _____	<b>FW II</b> <b>Contact Person:</b> _____ <b>Credentials:</b> _____ <b>Phone:</b> _____ <b>Email:</b> _____
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<b>Director:</b> <b>Phone:</b> _____ <b>Fax:</b> _____ <b>Website address:</b> _____	<b>Initiation Source:</b> <input type="checkbox"/> FW Office <input type="checkbox"/> FW Site <input type="checkbox"/> Student	<b>Corporate Status:</b> <input type="checkbox"/> For Profit <input type="checkbox"/> Nonprofit <input type="checkbox"/> State Gov't <input type="checkbox"/> Federal Gov't	<b>Preferred Sequence of FW:</b> <small>ACOTE Standards B.10.6</small> <input type="checkbox"/> Any <input type="checkbox"/> Second/Third only; First must be in: <input type="checkbox"/> Full-time only <input type="checkbox"/> Part-time option <input type="checkbox"/> Prefer full-time
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<b>OT Fieldwork Practice Settings (Check all that apply):</b>				
<b>Hospital-based settings</b> <input type="checkbox"/> Inpatient Acute <input type="checkbox"/> Inpatient Rehab <input type="checkbox"/> SNF/Sub-Acute/Acute Long-Term Care <input type="checkbox"/> General Rehab Outpatient <input type="checkbox"/> Outpatient Hands <input type="checkbox"/> Pediatric Hospital/Unit <input type="checkbox"/> Pediatric Hospital Outpatient <input type="checkbox"/> Inpatient Psychiatric	<b>Community-based settings</b> <input type="checkbox"/> Pediatric Community <input type="checkbox"/> Behavioral Health Community <input type="checkbox"/> Older Adult Community Living <input type="checkbox"/> Older Adult Day Program <input type="checkbox"/> Outpatient/hand private practice <input type="checkbox"/> Adult Day Program for DD <input type="checkbox"/> Home Health <input type="checkbox"/> Pediatric Outpatient Clinic	<b>School-based settings</b> <input type="checkbox"/> Early Intervention <input type="checkbox"/> School  Other area(s) Please specify: _____	<b>Age Groups:</b> <input type="checkbox"/> 0–5 <input type="checkbox"/> 6–12 <input type="checkbox"/> 13–21 <input type="checkbox"/> 22–64 <input type="checkbox"/> 65+	<b>Number of Staff:</b> OTs/OTRs: OTAs/COTAs:  Aides: PT: Speech: Resource Teacher: Counselor/Psychologist: Other:



<b>Student Prerequisites</b> (check all that apply)		<b>Health requirements:</b>	
<input type="checkbox"/> Medicare/Medicaid fraud check <input type="checkbox"/> Criminal background check <input type="checkbox"/> Child protection/abuse check <input type="checkbox"/> Adult abuse check <input type="checkbox"/> Fingerprinting <input type="checkbox"/> Infection control training	<input type="checkbox"/> CPR <input type="checkbox"/> First aid <input type="checkbox"/> HIPAA training <input type="checkbox"/> Prof. liability ins. <input type="checkbox"/> Own transportation <input type="checkbox"/> Interview	<input type="checkbox"/> HepB <input type="checkbox"/> MMR <input type="checkbox"/> Tetanus <input type="checkbox"/> Chest x-ray <input type="checkbox"/> Drug screening <input type="checkbox"/> TB/Mantoux	<input type="checkbox"/> Physical Check up <input type="checkbox"/> Varicella <input type="checkbox"/> Influenza Please list any other requirements:

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

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

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

**Describe available public transportation:**



Types of OT interventions addressed in this setting (check all that apply):

<b>Occupations: Client-directed occupations that match and support identified participation level goals</b> (check all that apply): ACOTE Standards C.1.1: C.1.2: C.1.7)		
<b>Activities of Daily Living (ADL)</b> <input type="checkbox"/> Bathing/showering <input type="checkbox"/> Toileting and toilet hygiene <input type="checkbox"/> Dressing <input type="checkbox"/> Swallowing/eating <input type="checkbox"/> Feeding <input type="checkbox"/> Functional mobility <input type="checkbox"/> Personal device care <input type="checkbox"/> Personal hygiene and grooming <input type="checkbox"/> Sexual activity  <b>Rest and Sleep</b> <input type="checkbox"/> Rest <input type="checkbox"/> Sleep preparation <input type="checkbox"/> Sleep participation  <b>Play</b> <input type="checkbox"/> Play exploration <input type="checkbox"/> Play participation  <b>Activities: Designed and selected to support the development of skills, performance patterns, roles, habits, and routines that enhance occupational engagement</b> <input type="checkbox"/> Practicing an activity <input type="checkbox"/> Simulation of activity <input type="checkbox"/> Role play Examples:	<b>Instrumental Activities of Daily Living (IADL)</b> <input type="checkbox"/> Care of others/pets <input type="checkbox"/> Care of pets <input type="checkbox"/> Child rearing <input type="checkbox"/> Communication management <input type="checkbox"/> Driving and community mobility <input type="checkbox"/> Financial management <input type="checkbox"/> Health management and maintenance <input type="checkbox"/> Home establishment and management <input type="checkbox"/> Meal preparation and clean up <input type="checkbox"/> Religious / spiritual activities and expression <input type="checkbox"/> Safety and emergency maintenance <input type="checkbox"/> Shopping <b>Leisure</b> <input type="checkbox"/> Leisure exploration <input type="checkbox"/> Leisure participation  <b>Preparatory Methods and Tasks: Methods, adaptations and techniques that prepare the client for occupational performance</b> <input type="checkbox"/> Preparatory tasks <input type="checkbox"/> Exercises <input type="checkbox"/> Physical agent modalities <input type="checkbox"/> Splinting <input type="checkbox"/> Assistive technology <input type="checkbox"/> Wheelchair mobility Examples:	<b>Education</b> <input type="checkbox"/> Formal education participation <input type="checkbox"/> Informal personal education needs or interests' exploration <input type="checkbox"/> Informal personal education participation <b>Work</b> <input type="checkbox"/> Employment interests and pursuits <input type="checkbox"/> Employment seeking and acquisition <input type="checkbox"/> Job performance <input type="checkbox"/> Retirement preparation and adjustment <input type="checkbox"/> Volunteer exploration <input type="checkbox"/> Volunteer participation  <b>Social Participation</b> <input type="checkbox"/> Community <input type="checkbox"/> Family <input type="checkbox"/> Peer/friend <b>Education:</b> describe  <b>Training:</b> describe  <b>Advocacy:</b> describe  <b>Group Interventions:</b> describe
<b>Method of Intervention</b> <b>Direct Services/Caseload for entry-level OT</b> <input type="checkbox"/> One-to-one: <input type="checkbox"/> Small group(s): <input type="checkbox"/> Large group: <b>Discharge/Outcomes of Clients (% clients)</b> <input type="checkbox"/> Home	<b>Outcomes of Intervention</b> <input type="checkbox"/> Occupational performance improvement and/or enhancement <input type="checkbox"/> Health and Wellness <input type="checkbox"/> Prevention <input type="checkbox"/> Quality of life <input type="checkbox"/> Role competence <input type="checkbox"/> Participation	<b>OT Intervention Approaches</b> <input type="checkbox"/> Create, promote health/habits <input type="checkbox"/> Establish, restore, remediate <input type="checkbox"/> Maintain <input type="checkbox"/> Modify, facilitate compensation, adaptation <input type="checkbox"/> Prevent disability

<input type="checkbox"/> Another medical facility <input type="checkbox"/> Home health		
<p><b>Please list the most common screenings and evaluations used in your setting:</b></p>          		

<p><b>Identify safety precautions important at your FW site</b></p>	
<input type="checkbox"/> Medications <input type="checkbox"/> Postsurgical (list procedures) <input type="checkbox"/> Contact guard for ambulation <input type="checkbox"/> Fall risk <input type="checkbox"/> Other (describe):	<input type="checkbox"/> Swallowing/choking risks <input type="checkbox"/> Behavioral system/ privilege level (locked areas, grounds) <input type="checkbox"/> Sharps count <input type="checkbox"/> 1 to 1 safety/suicide precautions



<b>Performance skills, patterns, contexts and client factors addressed in this setting</b> (check all that apply): <i>ACOTE Standard C.1.1</i>		
<b>Performance Skills:</b> <input type="checkbox"/> Motor skills <input type="checkbox"/> Process skills <input type="checkbox"/> Social interaction skills  <b>Performance Patterns:</b> <b>Person:</b> <input type="checkbox"/> Habits <input type="checkbox"/> Routines <input type="checkbox"/> Rituals <input type="checkbox"/> Roles <b>Group or Population:</b> <input type="checkbox"/> Habits <input type="checkbox"/> Routines <input type="checkbox"/> Rituals <input type="checkbox"/> Roles	<b>Client Factors:</b> <input type="checkbox"/> Values <input type="checkbox"/> Beliefs <input type="checkbox"/> Spirituality <input type="checkbox"/> Mental functions (affective, cognitive, perceptual) <input type="checkbox"/> Sensory functions <input type="checkbox"/> Neuromusculoskeletal and movement-related functions <input type="checkbox"/> Muscle functions <input type="checkbox"/> Movement functions <input type="checkbox"/> Cardiovascular, hematological, immunological, and respiratory system functions <input type="checkbox"/> Voice and speech functions; digestive, metabolic, and endocrine system functions <input type="checkbox"/> Skin and related-structure functions	<b>Context(s):</b> <input type="checkbox"/> Cultural <input type="checkbox"/> Personal <input type="checkbox"/> Temporal <input type="checkbox"/> Virtual <b>Environment:</b> <input type="checkbox"/> Physical <input type="checkbox"/> Social

<b>Most common services priorities</b> (check all that apply):			
<input type="checkbox"/> Direct service <input type="checkbox"/> Discharge planning <input type="checkbox"/> Evaluation	<input type="checkbox"/> Meetings (team, department, family) <input type="checkbox"/> Client education <input type="checkbox"/> Intervention	<input type="checkbox"/> Consultation <input type="checkbox"/> In-service training	<input type="checkbox"/> Billing <input type="checkbox"/> Documentation

<b>Target caseload/productivity for fieldwork students:</b> Productivity (%) per 40-hour work week: Caseload expectation at end of FW: Productivity (%) per 8-hour day: Number groups per day expected at end of FW:	<b>Documentation: Frequency/Format (briefly describe):</b> <input type="checkbox"/> Handwritten documentation: <input type="checkbox"/> Computerized medical records:      Time frame requirements to complete documentation:
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<b>Administrative/Management Duties or Responsibilities of the OT/OTA Student:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Schedule own clients</li> <li><input type="checkbox"/> Supervision of others (Level I students, aides, OTA, volunteers)</li> <li><input type="checkbox"/> Budgeting</li> <li><input type="checkbox"/> Procuring supplies (shopping for cooking groups, client/intervention-related items)</li> <li><input type="checkbox"/> Participating in supply or environmental maintenance</li> <li><input type="checkbox"/> Other:</li> </ul>	<b>Student Assignments. Students will be expected to successfully complete:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Research/EBP/Literature review</li> <li><input type="checkbox"/> In-service</li> <li><input type="checkbox"/> Case study</li> <li><input type="checkbox"/> In-service participation/grand rounds</li> <li><input type="checkbox"/> Fieldwork project (describe):</li> <li><input type="checkbox"/> Field visits/rotations to other areas of service</li> <li><input type="checkbox"/> Observation of other units/disciplines</li> <li><input type="checkbox"/> Other assignments (please list):</li> </ul>
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### OPTIONAL DATA COLLECTION:

1. 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.1.1, C.1.2, C.1.3, C.1.4, C.1.8, C.1.9*
2. 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.1.9, C.1.14, C.1.17, C.1.19*
3. Describe the training provided for OT staff for effective supervision of students (check all that apply). *ACOTE Standards C.1.9, C.1.15, C.1.16*

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:

4. 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. *ACOTE Standards C.1.2, C.1.3, C.1.10*

**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:
5. Describe funding and reimbursement sources and their impact on student supervision.

Revised by the Commission on Practice, 2020

Citation: American Occupational Therapy Association. (2020). *AOTA: Fieldwork Data Form*. American Occupational Therapy Association: North Bethesda, MD.



# APPENDIX B

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## PNWU CLINICAL INTERNSHIP AGREEMENT



School of  
Occupational Therapy  
200 University Parkway  
Yakima, WA 98901  
509.249.7839  
PNWU.edu  
SOT@PNWU.edu

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## CLINICAL INTERNSHIP AGREEMENT

This Agreement is between **NAME** ("Agency") organized and existing under the laws of its respective state and **Pacific Northwest University of Health Sciences** ("University") who operates a not-for-profit health professions institution with a mission to educate and train health care professionals emphasizing service among rural and medically underserved communities throughout the Northwest, and is effective as of **July 1, 2023**, duly signed by both parties.

- A. Agency owns and operates licensed or otherwise regulated facilities that qualify as a designated clinical education site per Accreditation Council for Occupational Therapy Education (ACOTE) standards.
- B. University operates a fully accredited College of Osteopathic Medicine program offering the Doctor of Osteopathic Medicine degree and is seeking accreditation of a new School of Occupational Therapy program from ACOTE which will offer a Master of Science in Occupational Therapy degree.
- C. The parties will mutually benefit by making a clinical training program ("Program") available to University students at the Agency facility.

The parties agree as follows:

### I. UNIVERSITY RESPONSIBILITIES

- A. Student Profiles. University shall advise each student enrolled in the Program to complete and send to Agency a student profile on a form to be agreed by the parties, which shall include the student's name, address, emergency contact information and telephone number.
- B. Scheduling of Assignments. University shall notify Agency's Program supervisor of student assignments, including the name of the student, level of academic preparation, performance expectations and length and dates of proposed clinical experience.
- C. Faculty Program Coordinator. University shall designate a faculty member to coordinate with Agency's designee in planning the Program to be provided to students.
- D. Records. University shall maintain personnel records for its staff and academic records for its students.
- E. Payroll Taxes and Withholdings. University shall be solely responsible for any payroll taxes, withholdings, workers' compensation and any other insurance or benefits of any kind for

University's employees and agents, if any, who provide services to the Program under this Agreement. Students are trainees, and are not employees or agents of either the University or the Agency; and therefore, shall receive no compensation, welfare and pension benefits, or workers' compensation insurance for their participation in the Program.

F. Student Responsibilities:

1. University students shall attend an orientation, if required, to be provided by Agency at the beginning of their enrollment in the Program.
2. Comply with Agency's clinical and administrative policies, procedures, rules and regulations.
3. Arrange own transportation and living arrangements.
4. Assume responsibility for their personal illnesses, necessary immunizations, tuberculin tests, and annual health examinations, including procurement and maintaining adequate health insurance coverage to pay for all necessary medical care; background check and drug screening as required by the facility.
5. Maintaining the confidentiality of patient information.
  - a. No student shall have access to or have the right to receive any medical record, except when necessary in the regular course of the clinical experience. The discussion, transmission, or narrative in any form by students or any individually identifiable patient information, medical or otherwise, obtained in the course of the Program is forbidden except as a necessary part of the clinical experience.
  - b. Neither University nor its students or employees shall be granted access to individually identifiable information unless the patient has first given consent using a form approved by Agency that complies with applicable state and federal law, including the Health Insurance Portability and Accountability Act ("HIPAA") and its implementing regulations.
  - c. Agency shall reasonably assist University in obtaining patient consent in appropriate circumstances. In the absence of consent, students shall use de-identified information only in any discussions about the clinical experience with University.
6. Comply with Agency's dress code and wearing name badges identifying themselves as students.
7. Attend an orientation to be provided by their University instructors.
8. Notify Agency immediately of any violation of state or federal laws by any student.
9. Provide services to Agency's patients only under the direct supervision of Agency's professional staff.
10. Each student shall be responsible for submitting their student profile before the Program training period begins. Agency shall regard this information as confidential and shall use the information only to identify each student.

II. AGENCY RESPONSIBILITIES

- A. Clinical Experience. Agency shall accept from University the mutually agreed upon number of students enrolled in the Program and shall provide the students with supervised clinical experience.
  - 1. The maximum number of University students who may participate in the Program during each training period shall be mutually agreed by the parties at least 30 days before the training period begins.
  - 2. The starting date and length of each Program training period shall be determined by mutual agreement.
- B. Agency Designee. Agency shall designate a member of its staff to participate with University's designee in planning, implementing, and coordinating the Program.
- C. Orientation Program for University Instructors. Agency shall provide an orientation for University instructors who will oversee students in the Program, and shall include all information and materials that University instructors are to provide during the student orientation required in paragraphs F.1. and F.7. above.
- D. Access to Facilities. Agency shall permit students enrolled in the Program access to Agency facilities as appropriate and necessary for their Program, provided that the students' presence shall not interfere with Agency's activities.
- E. Records and Evaluations. Agency shall maintain complete records and reports on each student's performance and provide an evaluation to University on forms the University shall provide.
- F. Withdrawal of Students. Agency may request that University withdraw from the program any student who Agency determines is not performing satisfactorily, refuses to follow Agency's administrative policies, procedures, rules and regulations, or violates any federal or state laws. Such requests must be in writing and must include a statement as to the reason or reasons for Agency's request. University shall comply with the written request within five (5) days after receipt.
- G. Emergency Health Care/First Aid. Agency shall, on any day when a student is receiving training at its facilities, provide to that student necessary emergency health care or first aid for accidents occurring in its facilities. Students shall be responsible for all associated costs.
- H. Student Supervision. Agency shall permit students to perform services for patients only when under supervision of a registered, licensed, or certified clinician/professional on Agency's staff. Such clinicians or professionals are to be certified or licensed in the discipline in which supervision is provided. Students shall work, perform assignments, and participate in ward rounds, clinics, staff meetings, and in-service educational programs at the discretion of their Agency-designated supervisors. Students are to be regarded as trainees, not employees, and are not to replace Agency's staff.
- I. Agency's Confidentiality Policies. As trainees, students shall be considered members of Agency's "workforce," as that term is defined by the HIPAA regulations at 45 C.F.R. 160.103,

and shall be subject to Agency's policies respecting confidentiality of medical information. In order to ensure that students comply with such policies, Agency shall provide students with substantially the same training that it provides to its regular employees.

### III. AFFIRMATIVE ACTION AND NON-DISCRIMINATION

The parties agree that all students receiving clinical training pursuant to this Agreement shall be selected without discrimination on account of race, color, religion, national origin, ancestry, disability, marital status, gender, gender identity, sexual orientation, age or veteran status. Both parties agree that it shall not discriminate against any person on the basis of race, ethnicity, color, sex, gender, religion, national origin, age, disabilities, sexual orientation, marital status, or any other characteristic protected by law for any reason including recruitment, selection and appointment.

### IV. INSURANCE

- A. University Insurance. University shall procure and maintain in force during the term of this Agreement, at its sole cost and expense, insurance in amounts reasonably necessary to protect it against liability arising from any and all negligent acts or incidents caused by University's employees and students. Coverage under such professional and commercial general liability insurance shall be not less than two million dollars (\$2,000,000) per claim and four million dollars (\$4,000,000) in the aggregate. Such coverage shall be obtained from a carrier rated A or better by AM Best or a qualified program of self-insurance. The University shall maintain and provide evidence of worker's compensation and disability coverage as required by law. University shall provide Agency with evidence of the insurance required under this paragraph upon request. University shall promptly notify Agency of any cancellation, reduction, or other material change in the amount or scope of any coverage required hereunder.
- B. Agency Insurance. Agency certifies that it has liability insurance with coverage in the sum of \$2 million dollars (\$2,000,000) per claims made and \$4 million dollars (\$4,000,000) aggregate and shall provide proof of insurance.

### V. INDEMNIFICATION

- A. Each party shall defend, indemnify and hold harmless the other party, its officers, agents, and employees, from all liability, loss or damage, including costs of defense they may suffer as a result of claims, demands, actions, damages, costs or judgments which result from the actions performed by the indemnifying party, its agents, employees or subcontractors pursuant to this Agreement.
- B. Agency agrees to indemnify, defend and hold harmless University and its affiliates, directors, trustee, officers, agents, and employees, against all claims, demands, damages, costs, expenses of whatever nature, including court costs arising out of or resulting from Agency's sole negligence, or in proportion to the University's comparative fault.

### VI. TERM AND TERMINATION

- A. Term. This Agreement shall be effective as of the date the agreement is fully executed, and duly signed by both parties and shall remain in effect for 5 years.
- B. Renewal. This Agreement may be renewed by mutual agreement.

- C. Termination. This Agreement may be terminated at any time upon 30 days' advance written notice by one party to the other, provided, however, that in no event shall termination take effect with respect to currently enrolled students, who shall be permitted to complete their training for any semester in which termination would otherwise occur.

## VII. GENERAL PROVISIONS

- A. Amendments. In order to ensure compliance with HIPAA, the following provisions of this Agreement shall not be subject to amendment by any means during the term of this Agreement or any extensions: Section II, Paragraph F. subdivisions 4.a) 4.b) and 4.c; Section II, Paragraph G, to the extent it provides that students are members of Agency's "workforce" for purposes of HIPAA; Section III, Paragraphs H and I; and Section V. This Agreement may otherwise be amended at any time by mutual agreement of the parties without additional consideration, provided that before any amendment shall take effect, it shall be reduced to writing and signed by the parties
- B. Assignment. Neither party shall voluntarily or by operation of law, assign or otherwise transfer this Agreement without the other party's prior written consent. Any purported assignment in violation of this paragraph shall be void.
- C. Captions. Captions and headings in this Agreement are solely for the convenience of the parties, are not a part of this Agreement, and shall not to be used to interpret or determine the validity of this Agreement or any of its provisions.
- D. Counterparts. This Agreement may be executed in any number of counterparts, each of which shall be deemed an original, but all such counterparts together shall constitute one and the same instrument.
- E. Entire Agreement. This Agreement is the entire agreement between the parties. No other agreements, oral or written, have been entered into with respect to the subject matter of this Agreement.
- F. Governing Law. The validity, interpretation, and performance of this Agreement shall be governed by and construed in accordance with the laws of the State of Washington, United States of America.
- G. Notices. Notices required under this Agreement shall be sent to the parties by certified or registered mail, return receipt requested, postage prepaid, at the addresses set forth below:

### TO UNIVERSITY:

Pacific Northwest University of Health Sciences  
Administration, Iron Horse Lodge 2<sup>nd</sup> Floor  
111 University Parkway, Suite 202  
Yakima, WA 98901

ATTN: Contracts Administrator

**TO AGENCY:**Facility Name: **Name**Address: **Street, City, State Zip**Contact: **Name, Credentials, Title**Phone: **xxx.xxx.xxxx**Email: **Email****VIII. EXECUTION**

By signing below, each of the following represent that they have authority to execute this Agreement and to bind the party on whose behalf their signature is made.

By initialing next to "Electronic Communications", each of the following agree to receive and/or obtain this Agreement by electronic communications (email). Each of the following also agree that any scanned signatures included in the Agreement sent by electronic communications (email) will be considered the legal equivalent of the party' manual signature.

**UNIVERSITY****AGENCY**

By: \_\_\_\_\_

By: \_\_\_\_\_

**Heather Fritz, Ph.D., OTR/L, CHC****Name****Program Director****Abbreviation Title****School of Occupational Therapy****Title**

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Electronic Communication: \_\_\_\_\_

Electronic Communication: \_\_\_\_\_

# APPENDIX C

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## FIELDWORK SELECTION CRITERIA AND SITE VISIT CHECKLIST





### Fieldwork Partner Selection Criteria and Site Visit Checklist

Name of Facility: Name

To assist with our data collection of meeting ACOTE objectives and program standards, please confirm that the following information and resources are available for students on fieldwork by checking Yes, or No:

Resource	Yes	No	N/A or TBD	Examples/evidence	Request help with development
Shares and/or supports PNWU mission and vision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Meets rural health criteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Meets MUA criteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Bonus – MUP or healthcare provider shortage area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Partner with PNWU School of PT and/or COM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
5-state catchment area (AK, ID, OR, MT, WA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Supervising OT practitioner(s) utilizes a client centered, evidence- and occupation-based approach to practice <i>Site Visit Questions: How does the OT team incorporate evidence into their practice? In-services? Journal clubs?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>

<i>What type of occupation-based interventions are used at your facility? Describe how you work with people, groups, and populations (looking for person-centered, family-centered language)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Fieldwork (FW) educators are prepared to supervise students (ex. AOTA FW Educator certified, completed Fieldwork Experience Assessment Tool [FEAT], demonstrates effective supervisor characteristics per manager/director, positive ratings from past students) <i>During conversations, correspondence, and site visits - look and listen for evidence of civility, collegiality, student friendliness, supportive attitudes, organization, and structure to guide the FW process. Evidence of positive ratings on SEFWES from past students if there are records available.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
The Level II FW educator has a minimum of 1 year practice experience, licensed, and/or otherwise regulated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
The Level I FW educator is licensed and/or otherwise regulated (ex. OTR, COTA, PT, PTA, SLP, teacher, rec. therapist, counselor, social worker, RN)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>

FW site has reviewed the PNWU OT program curriculum information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
FW Site Specific Learning Objectives that include how OT addresses psychosocial factors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Up-to-date AOTA Data Form on file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Potential student learning opportunities for inter- and/or intra-professional collaboration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Potential student learning opportunities for advocacy and leadership (ex. community outreach, health fairs, PCP office visits)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Resources (i.e., rehab protocols, in-services, resource files) to support independent student learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Support for FW educator (ex. Mentorship, protected time, initial reduced productivity to build up student caseload/time for student documentation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Support for students with diverse learning needs (ex. understand accommodations, IT support for a student with low vision)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
OTs primarily address behavioral health, mental health, and/or psychosocial factors in this setting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Student orientation provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Operational policies and procedures available for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Health and safety policies and procedures available for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>

Student access to Internet and computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Student access to electronic medical records or documentation system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
Supervision plan identified if primary FW educator is absent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
FW educator familiar with AOTA Fieldwork Performance Evaluation (FWPE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>
FW educator understands how to use Formstack to complete the AOTA FWPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Text	<input type="checkbox"/>

Check all that apply:

What is the student/supervisor ratio? ☐ 1:1 ☐ 1:2 ☐ 2:1 ☐ 2:2 ☐ Collaborative model ☐ Other: Describe

What is the plan for supervision? Level - ☐ direct ☐ indirect ☐ distant Frequency - ☐ daily ☐ weekly Format - ☐ individual ☐ group

Name and signature  
Site Coordinator Printed Name and Signature

Date  
Date

If data is collected via email correspondence, phone call, site visit, or Zoom:

Name and signature  
Academic Fieldwork Coordinator and/or Assigned Faculty Signature

Date  
Date

Thank you for your assistance with completing this form. If you should have any questions, need support and/or training, please feel free to contact the Academic Fieldwork Coordinator/Director of Clinical Education: Dr. Jami Flick, PhD, MS, OTR/L at office: (509) 249-7976, cell: (901) 568-6467 or email: [jflick@pnwu.edu](mailto:jflick@pnwu.edu)

# APPENDIX D

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## LEVEL II FIELDWORK PLACEMENT REQUEST FORM



## **Level II Fieldwork Placement Request Form**

Please complete this form and bring it to your fieldwork advising session. You are responsible for all costs associated with fieldwork. This is our opportunity to consider all housing and travel options available to reduce the financial burden on the student when possible. As you fill out the form, consider your resources and support network, such as friends and family whom you could live with or familiarity with the geographical area. Also, share more about your learning needs so we can find the right fit.

Name: \_\_\_\_\_ Class of: \_\_\_\_\_

List towns/cities and states that are options for housing during fieldwork:

What practice areas have you experienced thus far?

What practice areas interest you for future FW-II placements or to work in upon graduation?

What type of learning environment do you thrive in (e.g., structure, pace, learning style)?

What would help you grow and expand your comfort zone as a future OT?

What type of challenges do you want?

Are you willing to fulfill special placement requirements (i.e., resumes, interviews, applications)?

# **APPENDIX E**

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## **STUDENT REQUEST FOR CHANGE IN LEVEL II FIELDWORK PLACEMENT**



## Student Request for Change in Level II Fieldwork Placement

Student Name:

Date Submitted:

Fieldwork experience/course # (select one):

Fieldwork Education Site Information of Current Placement:

Insert clinic name:

Address, city, state, zip:

Setting type:

I am requesting a change for the above full-time fieldwork experience and understand the change may negatively impact the relationship the PNWU MSOT program has with the current fieldwork education site. Further, my request will be considered fairly, on an individual basis, but may not be granted.

In summary, my rationale for the change includes the following reason(s):

1.

2.

3.

Respond to the following questions:

1. What opportunities are provided at another facility that you will not receive at your current site?
2. What 3 educational objectives will you accomplish at the new facility that you will not be able to accomplish at the current facility?
3. How does the change to another facility affect your long-term practice goals?
4. How does the change to another facility affect your clinical education setting type requirements to graduate on time?

Student signature

Date

# APPENDIX F

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## LEVEL I FIELDWORK COLLABORATION FORM



## **Master of Science in Occupational Therapy Program**

### **Student and Fieldwork Educator Collaboration and Confirmation Form & Email Template**

#### **Level I Fieldwork**

Thank you so much for your support and dedication to the occupational therapy students at Pacific Northwest University of Health Sciences. This form confirms our collaboration and following affiliation placement for Level II Fieldwork with you. We need to collect important information for our accreditation requirements. Please use the link below to submit necessary details to Dr. Jami Flick, Academic Fieldwork Coordinator/Director of Clinical Education, as soon as possible.

Attached you will find:

- Syllabus for the student(s) current fieldwork course
- Course assignment descriptions
- Your responsibilities as their fieldwork educator
- The AOTA Level I Fieldwork Evaluation
- The established Level I Fieldwork learning objectives

Confirmation for Students: [Sally Student A, Sally Student B, etc.]

Facility name: \_\_\_\_\_

Dates of fieldwork: \_\_\_\_\_

Fieldwork supervision model: \_\_\_\_\_ 1:1 \_\_\_\_\_ 2:1 \_\_\_\_\_ 1:2 \_\_\_\_\_ Group \_\_\_\_\_ Other (please specify)

Should you have any questions or concerns about any of this information, please contact me.

Thank you!

Jami Flick, PhD, MS, OTR/L

Director of Clinical Education

#### **Primary Fieldwork Educator**

**The following questions must be completed and returned to academic fieldwork coordinator via Jotform to ensure compliance with ACOTE requirements. The form takes less than 5 minutes to**



**complete and please have your license # ready for input. A response is required for the student to start their fieldwork placement on time.** <https://form.jotform.com/232721259442050>

Name: \_\_\_\_\_ Credentials: \_\_\_\_\_

License # and state: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email: \_\_\_\_\_

Do you feel adequately prepared for providing fieldwork supervision?      Yes      No

What type of preparation have you completed to provide fieldwork supervision?

Check all that apply:

- ☐ Completed the AOTA Fieldwork Educator Certification Program
- ☐ Completed the AOTA Self-Assessment Tool for Fieldwork Educator Competency
- ☐ Participated in training module offered by the PNWU DCE
- ☐ Attendance at continuing education events on fieldwork education
- ☐ Mentorship by an experienced fieldwork educator
- ☐ Other: \_\_\_\_\_

Would you like additional resources or information about fieldwork education? Yes      No

Are you aware of and agree to the established fieldwork objectives? Yes      No

Please let us know if you have any other questions or concerns: OPEN Textbox

### **Level I Fieldwork Educator's Guide**

Level I Fieldwork is designed to both challenge the student and offer them an opportunity to practice the skills they are learning in a natural environment. Students will learn specific evaluation, documentation, intervention, client education, discharge planning, and diagnoses information concurrently with the Level I Fieldwork courses. Each Level I Fieldwork course is designed to expand on these skills and will progress to more independent and rigorous work as the program continues. Level I supervision may be provided by licensed, or otherwise regulated professionals, such as: occupational therapists, psychologists, physician assistants, teachers, nurses, social workers, physical therapists, etc. ([Accreditation Council on Occupational Therapy Education \[ACOTE\], 2018](#)). Fieldwork educators must have a recognized credential to supervise an OT student.

1. Prepare, maintain, and send fieldwork coordinator current information about setting/site
2. Schedule students in collaboration with fieldwork coordinator from PNWU and complete pre-fieldwork interview if appropriate
3. Verify contractual agreements between PNWU and your fieldwork site are signed

4. Complete a general orientation with the student to include staff introductions, tour of the physical facility, review of emergency procedures, facility/agency philosophy, and the fieldwork program/objectives/requirements
5. Define expectations clearly to students, assess skill and knowledge level
6. Ensure regular and periodic supervision of students and/or student supervisors (if applicable)
7. Assign service recipients/groups to student
8. Supervise provision of occupational therapy services; documentation, and verbal reporting by student as needed per state/federal regulations
9. Meet with student regularly to review performance and to provide guidance and feedback using objective and subjective data
10. Collaboratively develop goals with student for improved performance as needed
11. Notify fieldwork coordinator of any emergent student issues or if fieldwork site or student is requesting withdrawal or early termination of placement
12. Evaluate the performance of each student at end of placement by completing the AOTA Level I Fieldwork Student Competency Evaluation (Appendix G) and reviewing it with the student
13. Ensure final forms are co-signed by yourself as the fieldwork educator and student
14. Seek feedback from student via review and co-signature of Level I Fieldwork modified Student Evaluation of Fieldwork Experience (SEFWE) (Appendix P) form at end of Level I fieldwork

### **Learning Objectives:**

1. Apply knowledge of HIPAA guidelines, the AOTA code of ethics, and the Standards of Practice in OT in the context of the Fieldwork site.
2. Demonstrate sound judgment regarding safety of self and others by adhering to the fieldwork sites' safety regulations.
3. Demonstrate appropriate professional behaviors including, but not limited to time management, organization, self-directed learning, communication, and use of professional terminology.
4. Describe the values and beliefs of OT.
5. Define the role of OT in relation to the fieldwork setting.
6. Identify and provide evidence that can inform clinical practice at the fieldwork site.
7. Articulate the purpose of interprofessional collaboration and interpret how it is implemented at the fieldwork site (or could be implemented if it is not already established).
8. Identify psychosocial factors for the client, group, and/or population at the fieldwork site and describe how those factors can influence occupational participation and performance.
9. Describe how social determinants of health influence the client, group, and/or population at the fieldwork site and identify actions that OTs can take to ensure these factors are being considered during the therapeutic process.

### **Learning Opportunities:**

- Client/patient screening or basic evaluation with supervision
- Intervention planning and implementation with supervision
- Client/family education and discharge planning with supervision
- Meetings (team, IEP, rounds, staff, etc.)
- Consultations
- Activity analysis/occupational analysis
- Adaptive equipment selection/justification/fabrication
- Non-OT exposure (emerging practice areas, interdisciplinary collaboration)
- Discussion of interdisciplinary care, roles of OT, OTA, PT, ST, nursing etc.
- Group sessions with supervision
- Documentation – SOAP notes, narrative notes, portions or whole of an evaluation, goal writing

#### **Feedback Forms (provided by student):**

- AOTA Level I Fieldwork Student Competency Evaluation (Appendix G) – You, as the fieldwork educator, will complete one for each student. The student will also complete the form to compare to your form as a self-assessment exercise.
- Level I Fieldwork Student Evaluation of Fieldwork Experience (Appendix P) - Each student will complete one of these for your facility

AOTA Level I Fieldwork Student Competency Evaluation form (Appendix G) and the Level I SEFWE (Appendix P) should both be completed prior to the meeting at the end of rotation to review together. Please review the evaluation form first, followed by a review of the SEFWE, and then co-sign each form with the student.

Completed forms should be uploaded by the student to EXXAT and you should retain a copy for your records. After the student's rotation is complete, an email will be sent to you from EXXAT that verifies the supervision you provided and can be used as evidence for professional development units/continuing education units for your state license and NBCOT certification.

# APPENDIX G

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## AOTA LEVEL I FIELDWORK COMPETENCY EVALUATION



## LEVEL I FIELDWORK COMPETENCY EVALUATION FOR OT AND OTA STUDENTS

### Introduction

The purpose of Level I fieldwork is to provide experiential opportunities for students to gain the performance competency and confidence for progressing successfully in the academic program, including successive Level I and Level II fieldwork.

The *Level I Fieldwork Competency Evaluation for OT and OTA Students* complements the *AOTA Fieldwork Performance Evaluation for the OT Student* and *for the OTA Student*. It is designed to assess performance skills that build a foundation for successful completion of Level II fieldwork.

This tool is divided into five sections:

- I. Fundamentals of Practice
- II. Foundations of Occupational Therapy
- III. Professional Behaviors
- IV. Screening and Evaluation
- V. Intervention

The first 3 sections are identified as mandatory, as they are applicable to all practice settings and assess basic skills. The last 2 sections are *optional*, allowing an OT/OTA academic program to select relevant sections for a particular Level I experience in that program. The AFWC should make this clear to the FWEd. The criterion for satisfactory performance is determined by the OT/OTA academic program.

### Directions

This tool is to be completed by the identified FWEd for the Level I experience.

The rating scale ranges from



American  
Occupational Therapy  
Association

U	<b>Unacceptable</b>	Performance is weak in most required tasks and activities. Work is frequently unacceptable.
B	<b>Below Standards</b>	Opportunities for improvement exist; however, student has not demonstrated adequate response to feedback. Performance is occasionally unacceptable.
M	<b>Meets Standards</b>	Carries out required tasks and activities. This rating represents good, solid performance and should be used most often.
E	<b>Exceeds Standards</b>	Frequently carries out tasks and activities that surpass requirements. At times, performance is exceptional.
O	<b>Outstanding</b>	Carries out tasks and activities in consistently outstanding fashion. Performance is the best that could be expected from any student.

**COMMENT REQUIRED FOR ALL ITEMS SCORED “B” or “U.”**

**STUDENT INFORMATION:**

<b>Student Name:</b>			Date:
First	Middle	Last	Semester:
Site Name:			Practice Setting:
Student ID:			
Student's School:			Course Number:
Hours Completed:			FW Sequence: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/>

**PRIMARY FWEd INFORMATION**

<b>FWEd Name:</b>			<b>Past Experience:</b>	
First	Last	Credentials	(# of FWI Students)	(# of FWII students)
<b>FWEd License #:</b>			<b>FWEd Credentials:</b> OT: _____ OTA: _____	
<b>Years of Experience:</b> _____			Other: _____	
Have you attended the AOTA FWEd Certificate Course? <input type="checkbox"/> Yes <input type="checkbox"/> No			If other: _____	

Indicate the student's level of performance using the scale below.

U	<b>Unacceptable</b>	Performance is weak in most required tasks and activities. Work is frequently unacceptable.
B	<b>Below Standards</b>	Opportunities for improvement exist; however, student has not demonstrated adequate response to feedback. Performance is occasionally unacceptable.
M	<b>Meets Standards</b>	Carries out required tasks and activities. This rating represents good, solid performance and should be used most often.
E	<b>Exceeds Standards</b>	Frequently carries out tasks and activities that surpass requirements. At times, performance is exceptional.
O	<b>Outstanding</b>	Carries out tasks and activities in consistently outstanding fashion. Performance is the best that could be expected from any student.

**COMMENT REQUIRED FOR ALL ITEMS SCORED "B" or "U."**

**I. FUNDAMENTALS OF PRACTICE**

THE STUDENT:	U	B	M	E	O
<b>1. Adheres consistently to AOTA's Occupational Therapy Code of Ethics.</b> Follows ethical standards for FW setting. Abides by Health Insurance Portability and Accountability Act (HIPAA) and Family Education Rights and Privacy Act (FERPA). Respects privacy of client.  COMMENTS:					
<b>2. Adheres consistently to safety regulations, and uses sound judgment to ensure safety.</b> Follows FW setting's policies and procedures for client safety. Demonstrates awareness of hazardous situations, and reports safety issues to supervisor.  COMMENTS:					

## II. FOUNDATIONS OF OCCUPATIONAL THERAPY

THE STUDENT:	U B M E O
<b>1. Articulates values and beliefs of occupational therapy.</b> Verbalizes definition of occupational therapy as relevant to FW setting or audience. COMMENTS:	
<b>2. Utilizes relevant evidence to make informed practice decisions.</b> Connects class concepts to FW through inquiry or discussion. Articulates value of using evidence-based practice. Identifies and provides evidence that is relevant to setting or clients. COMMENTS:	

## III. PROFESSIONAL BEHAVIOR

	U B M E O
<b>1. Time management skills.</b> Consider student's ability to be prompt, arriving and completing assignments on time. COMMENTS:	
<b>2. Organization.</b> Consider student's ability to set priorities, be dependable, be organized, and follow through with responsibilities. COMMENTS:	
<b>3. Engagement in FW experience.</b> Consider student's apparent level of interest, level of active participation while on site, and investment in individuals and treatment outcomes. COMMENTS:	
<b>4. Self-directed learning.</b> Consider student's ability to take responsibility for own learning and to demonstrate motivation. COMMENTS:	
<b>5. Reasoning and problem solving.</b> Consider student's ability to use self-reflection; willingness to ask questions; ability to analyze, synthesize, and interpret information; and understand OT process. COMMENTS:	
<b>6. Written communication.</b> Consider student's ability to use proper grammar and spelling, legibility of work, successful completion of written assignments, and documentation skills. COMMENTS:	
<b>7. Initiative.</b> Consider student's initiative, ability to seek and acquire information from a variety of sources, and demonstrate flexibility as needed. COMMENTS:	
<b>8. Observation skills.</b> Consider student's ability to observe relevant behaviors related to occupational performance and client factors and to verbalize perceptions and observations. COMMENTS:	
<b>9. Participation in supervisory process.</b> Consider student's ability to give, receive, and respond to feedback; seek guidance when necessary; and follow proper channels of communication. COMMENTS:	



<b>10. Verbal communication and interpersonal skills with patients/clients, staff, and caregivers.</b> Consider student's ability to interact appropriately with individuals, such as eye contact, empathy, limit-setting, respectfulness, use of authority, and so forth; degree and quality of verbal interactions; use of body language and non-verbal communication; and exhibition of confidence. COMMENTS:	
<b>11. Professional and personal boundaries.</b> Consider student's ability to recognize and handle personal and professional frustrations; balance personal and professional obligations; handle responsibilities; work with others cooperatively, considerately, and effectively; and be responsive to social cues. COMMENTS:	
<b>12. Use of professional terminology.</b> Consider student's ability to respect confidentiality; appropriately apply professional terminology (e.g., <i>Occupational Therapy Practice Framework</i> terms and OT acronyms/abbreviations) in written and oral communication. COMMENTS:	

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#### IV. SCREENING AND EVALUATION (enter N/A = Not Applicable if not required on this placement)

THE STUDENT:	U	B	M	E	O	N/A
<b>1. Contributes to screening/evaluation process.</b> Communicates observations. Identifies resources for evaluation process. Could include chart review. COMMENT:						
<b>2. Completes an interview and drafts an occupational profile.</b> COMMENT:						
<b>3. Identifies potential goals from evaluation process.</b> COMMENT:						
<b>4. Drafts documentation consistent with practice setting.</b> COMMENT:						

#### V. INTERVENTION (enter N/A = Not Applicable if not required on this placement)

THE STUDENT:	U	B	M	E	O	N/A
<b>1. Contributes to intervention process.</b> Could include preparing clinic area and identifying resources and evidence. COMMENT:						
<b>2. Identifies interventions consistent with client evaluation and goals.</b> COMMENT:						

<b>3. Identifies (verbal or written) interventions consistent with client-centered approach, and provides clinical reasoning for interventions identified.</b> COMMENT:	
<b>4. Engages in and values evidence-based practice by seeking evidence to support or negate intervention approach.</b> COMMENT:	
<b>5. Administers interventions that are occupation-based and client-centered within guidelines of facility.</b> COMMENT:	
<b>6. Recognizes (verbal, written, or demonstration) need to modify interventions on basis of client response.</b> COMMENT:	
<b>7. Recognizes (verbal, written, or demonstration) need to modify or terminate intervention plan on basis of client response.</b> COMMENT:	
<b>8. Drafts documentation for intervention using typical procedures used in FW practice setting.</b> COMMENT:	

**Summary:**

**Student Signature**

**Date:**

**FWEd Signature**

**Date:**

Additional resources available at <https://www.aota.org/Education-Careers/Fieldwork.aspx>

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# APPENDIX H

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## LEVEL II FIELDWORK LEARNING OBJECTIVES

## LEVEL II FIELDWORKLEARNING OBJECTIVES

Upon completion of each Level II Fieldwork placement, students will demonstrate the attitudes, behaviors, knowledge, and skills for entry-level practice as occupational therapy practitioners in a wide variety of settings (i.e., medical, educational, community, and non-traditional).

At the completion of each Level II FW, the student(s) will demonstrate entry-level competency and ability to:

### I. *Fundamentals of Practice*

1. Ethically and professionally engage with all stakeholders (i.e., clients, families/support networks, colleagues, etc.) in accordance with the AOTA Code of Ethics and all federal, state, and facility regulations.
2. Safely conduct the therapy process with all stakeholders (i.e., clients, families/support networks, colleagues, etc.) per safety regulations and best practice.

### II. *Basic Tenets*

3. Effectively communicate the distinct value and roles of occupational therapy (OT) and occupations with all stakeholders (i.e., clients, families/support networks, colleagues, etc.)

### III. *Screening and Evaluation*

4. Utilize a person-centered, contextually, and culturally relevant screening and evaluation process grounded in theory and occupation-based practice.
5. Use robust, evidence-based methods to select appropriate screening and assessment tools and collect information from relevant resources (i.e., chart reviews, client interview).
6. Assess the psychological and social influences on occupational performance, including values, beliefs, spirituality, and social factors.
7. Prioritize client-centered, occupation-centered strategies to create a comprehensive and holistic occupational profile.
8. Proficiently administer standardized and non-standardized assessment tools that ensure valid and reliable results.
9. Accurately interpret evaluations to identify strengths and challenges for client/group/populations' occupational participation and performance.
10. Effectively synthesize and document the evaluation process.

### IV. *Intervention*

11. Develop client-centered and occupation-centered plans of intervention with measurable goals and objectives matched to the targeted outcomes and theoretical approaches from the evaluation process.

12. Use occupation during interventions that are matched to the client's goals and grades activities according to the client's needs and abilities.
13. Provide appropriate occupation-centered intervention to address psychosocial factors of the client, group, and/or population.
14. Instruct clients and family/support networks in home program/follow-up programs/use of appropriate assistive technologies.
15. Evaluate client outcomes, modify intervention plans as needed, and determine the need for continued service/discharge.
16. Competently document interventions and progress.

V. *Management of OT Services*

17. Collaborate with the OTA and other OT support personnel whom responsibilities may be assigned (i.e., therapy techs/aides, paraprofessionals, nurses' aides, and volunteers) in the provision of OT services, and demonstrate knowledge of the OT responsibilities for supervision.
18. Integrate knowledge of therapy costs, funding, and billing to productively meet practice standards.
19. Respond to the specific occupational therapy needs of rural and underserved communities.

VI. *Communication and Professional Behaviors*

20. Respectfully and effectively communicate in a culturally responsive and professional manner, both verbally and nonverbally.
21. Document in a clear, accurate, and concise manner.
22. Assume responsibility for professional behavior and growth that includes, but not limited to active collaboration with supervisors and team, responding constructively to feedback, and maintaining therapeutic relationships with all stakeholders.
23. Demonstrate reliable, productive work behaviors with consistent time management and punctuality.
24. Respect justice, equity, diversity, inclusion, and belonging of others.

# APPENDIX I

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## LEVEL II FIELDWORK STUDENT LETTER OF AGREEMENT FOR PLACEMENT

Date: xx/xx/xxxx

"I (state student name) have reviewed OTH (state appropriate course #s) syllabus/profile and read/understood the learning objectives and expectations for my fieldwork experience.

I understand all efforts have been made to take personal student requests into consideration and accept the placements assigned to me by the Director of Clinical Education (DCE). I understand if there are concerns or issues with this placement, that I can contact the DCE for assistance. I understand that fieldwork dates, setting type, and fieldwork educators are subject to change at the discretion of the fieldwork site. In the event of a cancellation, the Academic Fieldwork Coordinator will place me at the next best available site."

I. *Rotation:* Course #

*Dates:* xxxxxxxx

*Type of Fieldwork Rotation:* Physical Rehabilitation or Special interest

*Name of Institution:*

*Location:*

II. *Rotation:* Course #

*Dates:* xxxxxxxx

*Type of Fieldwork Rotation:* Physical Rehabilitation or Special interest

*Name of Institution:*

*Location:*

I authorize disclosure of my EXXAT Profile to the fieldwork on-site coordinators and educators. I have disclosed any possible conflicts of interest with the above agencies to the DCE. I acknowledge that I am responsible for satisfying all pre-fieldwork requirements of each facility prior to the fieldwork start date. I understand that I am financially responsible for all fieldwork related expenses. I agree to abide by the policies, procedures, and agreed upon expected performance standards as stated in the above listed materials. I understand that if I do not achieve these expectations by the date stated, it may result in delay of graduation from and/or dismissal from the MSOT program."

---

Student Signature

---

Date

# APPENDIX J

---

## WEEK 1 SURVEY



## WEEK 1 SURVEY

Filled out by student occupational therapist on EXXAT

Student Name: \_\_\_\_\_ FW Educator Name: \_\_\_\_\_

Facility: \_\_\_\_\_ Dept Phone: \_\_\_\_\_

QUESTIONS	YES	NO	NA
1. Would you like a telephone call or Zoom meeting with the AFC/DCE? If yes, please email the AFC/DCE with preferred times/day to accommodate your work hours.			
2. Are your housing conditions neat, clean, safe, acceptable? Please reach out for support from the AFC/DCE and/or Student Affairs if this negatively changes during the rotation. Comments:			
3. Do you feel personally and professionally prepared for your Level II Fieldwork at this facility? Comments:			
4. Has your Fieldwork Educator (FWed) provided an orientation to the facility and the policies and procedures? Comments:			
5. Does your FWed seem to demonstrate knowledge of your level of education and preparedness for the Level II Fieldwork? Comments:			
6. Have you and your FWed reviewed the fieldwork learning objectives and expectations for the rotation? Comments:			
7. Have you and your FWed established a schedule or process to meet, review goals and objectives, and exchange feedback on performance? Comments:			

<p>8. Do you feel that this facility and FWed will help you meet your goals and objectives?</p> <p>Comments:</p>			
<p>9. Has the FWed requested anything from the University/AFC/DCE? If yes, please share more details about the request in the comments section.</p> <p>Comments:</p>			
<p>10. What can the AFC/DCE do to better support you during the rotation?</p> <p>Comments:</p>	----	----	-----

# APPENDIX K

---

## WEEK 4 SURVEY

## WEEK 4 SURVEY

Fill out and review with your fieldwork educator then upload to EXXAT

Student Name: \_\_\_\_\_ FW Educator Name: \_\_\_\_\_

Facility: \_\_\_\_\_ Dept Phone: \_\_\_\_\_

### *To be completed by Student Occupational Therapist*

Yes No

1. Are you making progress on your goals? Comments:		
2. Are you receiving adequate/constructive feedback? Comments:		
3. Are you receiving daily feedback and mentorship from your fieldwork educator (FWED)? Comments:		
4. Compared to Week 1, are you feeling more prepared for this experience and practice area? Comments:		
5. Are you seeing a wide variety of clients, treatment approaches and experiences? Comments:		
6. Do you need a phone call or Zoom meeting? If yes, please email the DCE with preferred times/day to accommodate your work hours.		
7. What are you doing now that you couldn't do when you first started?	---	--

### *To be completed by Fieldwork Educator*

Yes No

1. Is the student prepared academically to meet the demands of the patients/clients/groups/population? Comments:		
2. Is the student integrating their classroom knowledge with clinical application? Comments:		
3. Is the student making progress toward meeting professional goals and learning objectives? Comments:		
4. Is the student on track to potentially pass midterm at Week 6? Comments:		
5. Is the student receptive to your feedback and mentorship, and integrating feedback into practice? Comments:		
6. Does the student demonstrate effective communication skills with patients/clients, families/caregivers, interdisciplinary team, and you? (Communication includes verbal, nonverbal, written, and active listening)		

Comments:		
7. Is the student safe in their clinical application and professional conduct? Comments:		
8. Do you need a phone call or Zoom meeting with the Director of Clinical Education?		

**Comments:**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
FWE signature

# APPENDIX L

---

## WEEK 7 SURVEY

## WEEK 7 SURVEY

**SUBMIT ON EXXAT:** Jami Flick, MS, OTR/L, AFWC

**Student Name:** \_\_\_\_\_ **Fieldwork Educator:** \_\_\_\_\_

**Facility:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**1-Needs Improvement; 2- Sufficient/Adequate/Meets Needs; or 3-Exceptional**

**1. Do you feel welcomed (like you belong) at the facility?** **1   2   3**

**COMMENTS:**

**2. Is your educator a positive role model of professional behavior in practice?** **1   2   3**

**COMMENTS:**

**3. Does the amount of supervision meet your needs?** **1   2   3**

**COMMENTS:**

**4. Do you have adequate opportunities to communicate with your fieldwork educator (FWed)?** **1   2   3**

**COMMENTS:**

**5. Has your FWed shown respect/sensitivity for your learning needs?** **1   2   3**

**COMMENTS:**

**6. Do you feel comfortable asking questions/approaching your FWed?** **1   2   3**

**COMMENTS:**

**7. Is feedback from your FWed constructive and tactful?** **1   2   3**

**COMMENTS:**

**8. Do you feel comfortable seeking assistance from other professional staff/team members?** **1   2   3**

**COMMENTS:**

**9. Have the expectations and assignments been clearly defined?** **1   2   3**

**COMMENTS:**

10. Has your FWed encouraged self-directed learning? 1 2 3

COMMENTS:

11. Has your FWed taught knowledge and skills to facilitate your learning? 1 2 3

COMMENTS:

12. Does your educator ask questions that promote your problem-solving skills? 1 2 3

COMMENTS:

13. Does your FWed model person-centered, occupation-centered practice? 1 2 3

COMMENTS:

14. Is your educator approachable and open to new ideas, allowing you to be flexible in your therapy approach? 1 2 3

COMMENTS:

15. Is the amount of delegated responsibility appropriate? 1 2 3

COMMENTS:

16. Does the caseload provide opportunity for a meaningful learning experience? 1 2 3

COMMENTS:

17. Are assignments appropriate and reviewed in timely manner? 1 2 3

COMMENTS:

18. Do the assignments benefit your learning and professional development? 1 2 3

COMMENTS:

19. Are you able to complete your assignments in a timely fashion? 1 2 3

COMMENTS:

20. How many hours a week are you spending on related assignments outside of the scheduled workday?

\_\_\_\_\_ HOURS

COMMENTS:

21. Are you comfortable with oral reports with your educator, department/team, and at family/client conferences? 1 2 3

COMMENTS:

22. Are you comfortable with written reports such as note writing, interdisciplinary reports, and funding requests? 1 2 3



**COMMENTS:**

23. Have you had the opportunity to supervise assistants, technicians, etc.? YES NO

**COMMENTS:**

24. Are you able to find resources and reference materials for your client needs and special interests? 1 2 3

**COMMENTS:**

25. Have you encountered a situation that you felt that you were truly an “OT” and felt confident in your skills? If so, please describe the situation and your actions. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

26. Have you encountered a situation that you felt you were not prepared for? If so, please describe the situation, why you did not feel prepared, and the actions you took to respond in the immediate and prepare for future challenges. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Fieldwork Educator Signature**

\_\_\_\_\_  
**Date**

# APPENDIX M

---

## WEEK 10 SURVEY

## WEEK 10 SURVEY

Fill out and review with your fieldwork educator then upload to EXXAT

Student Name: \_\_\_\_\_ FW Educator Name: \_\_\_\_\_

Facility: \_\_\_\_\_ Dept Phone: \_\_\_\_\_

*To be completed by Student Occupational Therapist*

Yes

No

1. Are you making progress toward your goals? Comments:		
2. Are you receiving adequate constructive feedback? Comments:		
3. Are you receiving regular feedback and mentorship from your fieldwork educator (FWed)? Comments:		
4. Are you feeling more prepared for entry-level practice in this setting? Comments:		
5. Are you seeing a wide variety of clients, treatment approaches and experiences? Comments:		
6. Do you need a phone call or Zoom meeting? If yes, please email the AFC/DCE with preferred times/day to accommodate your work hours.		
7. What can you teach someone to do that you didn't know 10 weeks ago?	--	-

1. Is the student prepared academically to meet the demands of the patients/clients/groups/population? Comments:		
2. Is the student integrating their classroom knowledge with clinical application? Comments:		
3. Is the student making progress toward meeting professional goals and learning objectives? Comments:		
4. Is the student on track to potentially pass the fieldwork by Week 12? Comments:		
5. Is the student receptive to your feedback and mentorship, and integrating feedback into practice? Comments:		
6. Does the student demonstrate effective communication skills with patients/clients, families/caregivers, interdisciplinary team, and you? (Communication includes verbal, nonverbal, written, and active listening) Comments:		
7. Is the student ethical and safe in their clinical application and professional conduct? Comments:		
8. Do you need a phone call or Zoom meeting with the Director of Clinical Education?		

Comments:

\_\_\_\_\_  
Student Signature\_\_\_\_\_  
Date\_\_\_\_\_  
FWE signature\_\_\_\_\_  
Date

# APPENDIX N

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## AOTA LEVEL II FIELDWORK PERFORMANCE (FWPE) EVALUATION



## Fieldwork Performance Evaluation (FWPE) for the Occupational Therapy Student (Revised in 2020)

FUNDAMENTALS OF PRACTICE	
1	<b>Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations.</b> Examples: Medicare, Medicaid, client privacy, social media, human subject research
2	<b>Adheres to safety regulations and reports/documents incidents appropriately.</b> Examples: fire safety, OSHA regulations, body substance precautions, emergency procedures
3	<b>Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents.</b> Examples: body mechanics, medical safety, equipment safety, client-specific precautions, contraindications, community safety
BASIC TENETS	
4	<b>Articulates the values, beliefs, and distinct perspective of the occupational therapy profession to clients and other relevant parties clearly, confidently, and accurately.</b> Examples: families, caregivers, colleagues, service providers, administration, the public
5	<b>Articulates the value of occupation as a method and desired outcome of occupational therapy to clients and other relevant parties clearly, confidently, and accurately.</b> Examples: families, caregivers, colleagues, service providers, administration, the public
6	<b>Articulates the role of occupational therapy practitioners to clients and other relevant parties clearly, confidently, and accurately.</b> Examples: families, caregivers, colleagues, service providers, administration, the public
SCREENING AND EVALUATION	
7	<b>Articulates a clear and logical rationale for the evaluation process based on client information, contexts, theories, frames of reference, and/or practice models.</b>
8	<b>Obtains sufficient and necessary information from relevant sources throughout the evaluation process.</b> Examples: record or chart review, client, family, caregivers, service providers
9	<b>Selects relevant screening and assessment tools based on various factors.</b> Examples: Psychosocial factors, client priorities, needs, and concerns about occupational performance and participation, theoretical support, evidence, practice context, funding sources, cultural relevance
10	<b>Determines the client's occupational profile and occupational performance through interview and other appropriate evaluation methods.</b>  <b>Occupational profile:</b> Summary of the client's occupational history and experiences, patterns

	<p>of daily living, interests, values, and needs.</p> <p><b>Occupational performance:</b> Act of doing and accomplishing a selected action (performance skill), activity, or occupation that results from the dynamic transaction among the client, the context, and the activity. Improving or enabling skills and patterns in occupational performance leads to engagement in occupations or activities.</p>
11	<p><b>Evaluates and analyzes client factors and contexts that support or hinder occupational performance.</b></p> <p><b>Client factors:</b> Specific capacities, characteristics, or beliefs that reside within the person and that influence performance in occupations. Client factors include values, beliefs, and spirituality; body functions (includes psychological functions); and body structures.</p> <p><b>Contexts:</b> Variety of interrelated conditions within and surrounding the client that influence performance, including cultural, personal, physical, social, temporal, and virtual contexts.</p> <p>Includes the consideration of all client centered components including psychosocial factors</p>
12	<p><b>Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable.</b></p> <p>Examples: follows assessment protocols, adheres to time guidelines</p>
13	<p><b>Modifies evaluation procedures based on client factors and contexts.</b></p> <p>Examples: uses a quiet space, breaks up evaluation into smaller parts, provides multisensory instructions</p>
14	<p><b>Interprets evaluation results to determine the client's occupational performance strengths and challenges.</b></p>
15	<p><b>Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance.</b></p>
<b>INTERVENTION</b>	
16	<p><b>Articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence.</b></p>
17	<p><b>Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models.</b></p> <p>Examples: creates relevant and measurable goals in collaboration with the client and/or family/caregivers; recommends additional consultation and referrals</p>
18	<p><b>Uses evidence from research and relevant resources to make informed intervention decisions.</b></p>
19	<p><b>Selects client-centered and occupation-based interventions that motivate and challenge the client to achieve established goals that support targeted outcomes.</b></p> <p>Includes the consideration of all client centered components including psychosocial factors</p>
20	<p><b>Implements client-centered and occupation-based intervention plans.</b></p>

	Includes the consideration of all client centered components including psychosocial factors
21	<b>Chooses and, if needed, modifies intervention approach to achieve established goals that support targeted outcomes.</b> Examples: prevention, restoration, maintenance, promotion
22	<b>Modifies task and/or environment to maximize the client's performance.</b> Examples: upgrades/downgrades task; arranges client's workspace for optimal performance
23	<b>Modifies the intervention plan and determines the need for continuation or discontinuation of services based on the client's status.</b>
24	<b>Documents the client's response to services in a manner that demonstrates the effectiveness of interventions.</b>
<b>MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES</b>	
25	<b>Demonstrates through practice or discussion the ability to collaborate with and assign appropriate tasks to the occupational therapy assistant, occupational therapy aide, or others to whom responsibilities might be assigned, while remaining responsible for all aspects of treatment.</b> Examples: paraprofessionals, nurses' aides, volunteers
26	<b>Demonstrates through practice or discussion an understanding of costs and funding systems related to occupational therapy services, such as federal, state, third party, and private payers.</b> Examples: billing for OT services, inventory and ordering of supplies for OT services, and options for client procurement of adaptive equipment
27	<b>Demonstrates knowledge about the organization.</b> Examples: mission and vision, accreditation status, licensing, specialty certifications
28	<b>Meets productivity standards or volume of work expected of occupational therapy students.</b>
<b>COMMUNICATION AND PROFESSIONAL BEHAVIORS</b>	
29	<b>Communicates clearly and effectively, both verbally and nonverbally.</b> Examples: clients, families, caregivers, colleagues, service providers, administration, the public
30	<b>Produces clear and accurate documentation.</b> Examples: legibility, spelling, punctuation, grammar, adherence to electronic health documentation requirements
31	<b>Collaborates with fieldwork educator(s) to maximize the learning experience.</b> Examples: initiates communication, asks for feedback about performance, identifies own strengths and challenges
32	<b>Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with fieldwork educator(s) and others.</b>
33	<b>Responds constructively to feedback in a timely manner.</b>
34	<b>Demonstrates consistent and acceptable work behaviors.</b>

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	Examples: punctuality, initiative, preparedness, flexibility, dependability, professional appearance
<b>35</b>	<b>Demonstrates effective time management.</b> Examples: plans ahead, adheres to schedules, completes work in expected timeframe
<b>36</b>	<b>Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.</b>
<b>37</b>	<b>Demonstrates respect for diversity factors of others.</b> Examples: culture, socioeconomic status, beliefs, identity

# APPENDIX O

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## AOTA FWPE SCORING GUIDE



# Fieldwork Performance Evaluation (FWPE) Rating Scoring Guide (Revised in 2020)

## Rating Scale

- 4- Exemplary performance
- 3- Proficient performance
- 2- Emerging performance
- 1- Unsatisfactory performance

## Rating scale definitions

<b>Exemplary performance</b>	Demonstrates satisfactory competence in specific skills consistently; demonstrates substantial breadth and depth in understanding and/or skillful application of fundamental knowledge and skills.
<b>Proficient performance</b>	Demonstrates satisfactory competence in specific skills; demonstrates adequate understanding and/or application of fundamental knowledge and skills.
<b>Emerging performance</b>	Demonstrates limited competence in specific skills (inconsistencies may be evident); demonstrates limited understanding and/or application of fundamental knowledge and skills (displays some gaps and/or inaccuracies).
<b>Unsatisfactory performance</b>	Fails to demonstrate competence in specific skills; performs in an inappropriate manner; demonstrates inadequate understanding and/or application of fundamental knowledge and skills; (demonstrates significant gaps and/or inaccuracies).

## FWPE for OTS Scoring:

- All items included must be scored to receive a Pass on the FWPE for OTS
- A sum score of 111 or higher will be required to receive a Pass on the FWPE for OTS
- A score of 3 or higher on the items

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- # 2 (Adheres to safety regulations and reports/documents incidents appropriately), and
- # 3 (Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents) will all be required to receive a Pass on the FWPE for OTS
- Scores of 1 on any of the items is not allowed to receive a Pass on the FWPE for OTS

### **FWPE for OTAS Scoring:**

- All items must be scored to receive for a Pass on the FWPE for OTAS
- A sum score of 91 or higher will be required to receive a Pass on the FWPE for OTAS
- A score of 3 or higher on the items
  - # 1 (Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations),
  - # 2 (Adheres to safety regulations and reports/documents incidents appropriately), and
  - # 3 (Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents) will all be required to receive a Pass on the FWPE for OTAS
- Scores of 1 on any of the items is not allowed to receive a Pass on the FWPE for OTAS

# APPENDIX P

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## AOTA STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE) FORM



## 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).

TOPIC	Adequate		Comment
	Y	I	
Site-specific fieldwork objectives			
Student supervision process			
Requirements/assignments for students			
Student schedule (daily/weekly/monthly)			
Agency/Department policies and procedures			
Documentation procedures			
Safety and Emergency Procedures			

## CLIENT PROFILE

Check age groups worked with

List most commonly seen occupational performance issues in this setting

Age	
0–5 years old	
6–12 years old	
13–21 years old	
22–65 years old	
65+ years old	

Occupational Performance Issues

Describe the typical population: \_\_\_\_\_

---

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## OCCUPATIONAL THERAPY PROCESS

### I. EVALUATION

List assessment tools used	Observed	Performed

### 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.

Types of Intervention	Individual	Group	Co-Tx	Consultation
Occupations: client-directed life activities that match/support/address identified goals				
Activities: meaningful to client, address performance skills and patterns to facilitate occupational engagement				
Preparatory methods: modalities, devices and techniques. These are provided to the client, no active engagement				
Preparatory tasks: actions that target specific client factors or performance skills. Requires client engagement				

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:

Type of outcome	Yes	No	Provide example
Occupational Performance			
Prevention			
Health & Wellness			
Quality of Life			
Participation			
Role competence			
Well-being			
Occupational Justice			

\*\*OTPF-III terminology

### ASPECTS OF THE ENVIRONMENT

	Yes	No
The current Practice Framework was integrated into practice		
Evidence-based practice was integrated into OT intervention		
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

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

	Circle one				
Expectations of fieldwork experience were clearly defined	1	2	3	4	5
Expectations were challenging but not overwhelming	1	2	3	4	5
Experiences supported student's professional development	1	2	3	4	5

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

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

Study the following evaluations:

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Study the following intervention methods:

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Read up on the following in advance:

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

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

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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

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

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# APPENDIX Q

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## PNWU SOT LEARNING CONTRACT

## LEARNING CONTRACT

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Week of Fieldwork: \_\_\_\_\_

Fieldwork Supervisor's Name: \_\_\_\_\_ AFWC's Name: \_\_\_\_\_

Specified Target Behavior	Long Term Goals	Short Term Goals	Indicate if Goals are Met or Not Met	Positive Feedback	Things that Need Improvement
1.			Met Not Met Comments:		
2.			Met Not Met Comments:		
3.			Met Not Met Comments:		
4.			Met Not Met Comments:		

Additional Comments:

Student Signature: \_\_\_\_\_ Fieldwork Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_