



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

FIELDWORK MANUAL POLICIES & PROCEDURES AND

SUPPLEMENTAL FORMS/INFORMATION FOR THE FIELDWORK EXPERIENCE

Occupational Therapy Doctoral Program School

of Health Professions

Rutgers, The State University of New Jersey

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Creating innovative leaders who can enable occupational justice through occupation-based therapy in contemporary and future practice areas

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Honoring current and emerging evidence-based, collaborative practice by building bridges to the community

.....

Developing a solid foundation for OT practice and scholarship over a changing health care environment

Effective August 2025

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**SOME FORMS ARE COMPLETED IN A DIFFERENT FORMAT. FORMAT IS SUBJECT TO CHANGE.
STUDENTS WILL BE NOTIFIED AS THESE CHANGES ARE MADE.**

FORM	PLATFORM
Student Evaluation of the Fieldwork Experience	Exxat or Formstack
Student Evaluation of the Fieldwork Educator	Exxat or Formstack
Level II Fieldwork Performance Evaluation (midterm and final)	Formstack
AOTA Data Form	Exxat
Time Logs	Exxat



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

A LETTER TO OUR FIELDWORK EDUCATORS

Dear Occupational Therapy Fieldwork Educator,

We sincerely thank you for your commitment to fieldwork education. Fieldwork experiences are an integral part of the preparation of our students to become occupational therapists. Our Rutgers' program is new and developing and we have been awed by how many of you have chosen to be our partners in this process. We would not be able to create experienced, educated, and critically thinking occupational therapists without you. Your part in this process is invaluable.

We are aware that in an ever-changing medical world that having students is not always easy; and therefore, your dedication of your time, energy, and knowledge to our students means so much to us.

This Occupational Therapy Doctoral Fieldwork Manual provides information about Rutgers' School of Health Professions, our occupational therapy doctoral program including our mission, values and curriculum, our fieldwork policies and procedures, and information vital to our students' success. We have created this document to serve as a guiding tool for both you and our students throughout the fieldwork process.

Thank you again for your support, and we look forward to collaborating with you.

Sincerely,

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PURPOSE OF THE MANUAL

The Occupational Therapy Doctoral Program is committed to the highest quality occupational therapy education and clinical experience to enable our graduates to serve their patients with exceptional occupation-based clinical services, to be responsive to changes in health care and expand care to underserved communities, and to engage in scholarship/research in occupational science and occupational therapy.

This fieldwork education is a critical aspect of the education process for occupational therapy students. This manual is intended to provide information about the fieldwork education curriculum in the entry-level Occupational Therapy Doctoral Program at Rutgers University's School of Health Professions. This document is intended to supplement the policies and procedures as outlined in the Rutgers University/School of Health Professions catalogue, by providing information relative to the standards and processes of the Occupational Therapy Doctoral Program in higher education. This manual contains important information concerning the organization, procedures, and policies governing the fieldwork education curriculum. All academic faculty, clinical faculty, and students should be familiar with the information contained in this manual. All students are responsible for reviewing, understanding, and following the information contained in this manual.

RUTGERS HEALTH SCHOOL OF HEALTH PROFESSIONS

Rutgers University School of Health Professions

Information about Rutgers School of Health Professions is available at:

<http://shp.rutgers.edu/About/index.html>

School of Health Professions Student Handbook

The School of Health Professions student handbook is available here:

<https://shp.rutgers.edu/student-affairs/>

Please be aware that students participating in the School of Health Professions (SHP), must be familiar with not only the policies of the Occupational Therapy Doctoral Program, but also the

policies of the Department of Rehabilitation and Movement Sciences, the School of Health Professions (SHP), Rutgers Health and Rutgers University.

OCCUPATIONAL THERAPY DOCTORATE PROGRAM

OTD Program Website

<https://shp.rutgers.edu/rehabilitation-movement-sciences/occupational-therapy-doctorate/>

OTD Program Mission

To provide the highest quality occupational therapy education to enable our graduates to serve their patients with exceptional occupation-based clinical services, to be responsive to changes in health care and expand care to underserved communities, and to engage in scholarship/research in occupational science and occupational therapy.

OTD Program Values

We value graduates who are recognized for their leadership and are practitioners who provide progressive, innovative and interprofessional therapy in community-based practice settings, promote health-wellness within many practice areas, and expand innovative practice in contemporary settings (e.g., justice-based settings).

Educational Philosophy of the OTD Program

We utilize an engaged learning approach within all courses in the curriculum. We strive to foster culturally sensitive, and evidence based clinical competence through the student's active engagement in a collaborative process (student, client, and educator) that builds on prior knowledge and experience. Learners integrate professional development, academic knowledge, active learning, clinical reasoning, and self-reflection through experiences in and beyond the classroom (AOTA, 2015). The program facilitates integration of philosophical, theoretical, and practical knowledge, values, beliefs, ethics, and technical skills for broad application in health care to improve health in underserved populations, communities, and support engagement in occupation to improve health, participation and quality of life for all persons.

Learning outcomes will be direct and indirect using a wide variety of active learning strategies. Learning is an active endeavor and people learn in a wide variety of ways, consequently, we will provide foundational knowledge for students to be able to engage in higher level thinking balanced with facilitation of meaningful and self-directed learning. We will include more traditional outcomes (i.e., examinations, presentations, reflection papers, and laboratory assignments) with service learning, objective-structured teaching encounters (OSTEs) with standardized patients, case studies, problem-based learning, team-based learning and simulations and finally will use learning outcomes to reinforce evidence-based practice (i.e., critical appraisal of papers and topics and development of research questions, research proposals and presentations). Effective learning outcomes, like the complex forms of active learning above, where students are encouraged to solve authentic clinical situations and learn skills relevant to occupational therapy will be emphasized.

Occupational justice is “the right of every individual to be able to meet basic needs and to have equal opportunities and life chances to reach toward her or his potential but specific to the individual’s engagement in diverse and meaningful occupation.”

We believe that meaningful engagement in desired occupations is a basic human need regardless of level of physical, cognitive, or emotional health, and that every person has the right to have equal opportunities and life chances to reach their potential. We view participation in meaningful occupations as a determinant of health and wellbeing and as being specific to an individual’s needs. Occupations are defined as activities that have meaning and value for the daily lives of individuals, families, groups, communities, and populations.

Furthermore, we try to embody the tenant that engagement in authentic occupations may be used to prevent or mediate the effects of disability and to facilitate independence and maximum adaptation (AOTA, 2011). When individuals are threatened by stress, deprivation, disease, illness or injury, occupational therapy interventions address (1) the individual’s physical, psychological, and social capacities to achieve occupational competence, (2) the skills and habits of effective role performance and (3) environmental modification to support participation.

Occupational performance evolves in response to the interaction of the person, occupation and context or environment. Additionally, occupations will vary according to change over the course of a lifetime and vary for every person. Each role has its associated developmentally appropriate and role-appropriate tasks that influence the nature of one's occupations. Human learning occurs via the dynamic interaction between a person and a task in the context of the relevant environment. Occupational therapy strives to facilitate this process through active collaboration between the client and the therapist.

Occupational justice helps to assure a dedication to the advocacy and advancement of practice by making it more accessible to underserved populations, providing services through community-based entities, and extending services in contemporary/new/novel settings.

OTD Program Statement of Inclusivity

The OTD Program is committed to creating an inclusive environment in which all students are respected and valued. Disrespectful language or behavior based on age, ability, color/ethnicity/race, gender identity/expression, marital/parental status, military/veteran's status, national origin, political affiliation, religious/spiritual beliefs, sex, sexual orientation, socioeconomic status or other visible or non-visible differences will not be tolerated.

Rutgers University, Rutgers Health, School of Health Professions, Department of Rehabilitation and Movement Sciences and our OTD program recognizes the value of diversity and is committed to providing appropriate support for all its student body.

The OTD Program reaffirms its policy of conducting admissions, educational, and all related and supporting services in a manner which does not discriminate unlawfully because of a person's race, color, creed, religion, sex, sexual orientation, national origin, age, physical or mental handicap, military status, marital status, or other factors prohibited by law. This is the governing principle in student admissions, other student services, and employment related activities.

The OTD Program commits itself to a program of affirmative action to encourage the application from minority and women students, to identify and correct the effects of any past discrimination in the provision of educational and related services, and to establish organizational structures and

procedures which will assure equal treatment and access to the facilities and educational benefits of the University to all students.

The University's Equal Educational Opportunity Policy can be found on the University's [Web Site](#).

FIELDWORK EDUCATION OVERVIEW

Fieldwork Educator Contact Information

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Occupational Therapy Doctorate Program
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Introduction to Fieldwork

Fieldwork education is an essential part of creating critical thinking, dynamic occupational therapy students. Fieldwork education supports the process of becoming an OT professional through the mentorship provided by fieldwork educators. It engages students in the real-world context to improve their related strengths, skills, and capabilities. The fieldwork opportunities in Rutgers' OTD program reflect the phases and foci of the curriculum by preparing students in the traditional, nontraditional, and emerging settings.

This program is a 3-year program consisting of 8 semesters. During that time, students will participate in four Level I fieldwork experiences, two Level II fieldwork experiences, and one doctoral capstone experience and project. Students will be engaged in fieldwork experiences for 7 of their 8 semesters at Rutgers. The program design reflects the importance and critical nature of fieldwork experiences for creating knowledgeable, critically thinking, entry-level occupational therapists.

The Occupational therapy fieldwork curriculum is created in accordance with the standards of

the American Council for Occupational Therapy Education (ACOTE).

Each student is required to:

- Abide by the policies outlined in the SHP Student Handbook and the OT Fieldwork Manual.
- Read the OT Fieldwork Policies and Procedures Manual
- Sign and upload the “Signature Page” to the Exxat system.

Exxat System

The OTD Program uses the “Exxat System” as a central place for storage of learning templates and student documents and for communication with and among students, fieldwork educators and faculty. The Exxat System is HIPAA compliant and does not accept client identification data.

Students are oriented to the Exxat System during orientation and should also refer to and use orientation material provided through online videos within the Exxat System.

Academic Integrity

As an academic health care program, we have an obligation to ensure the safety of the consumers of occupational therapy services. Therefore, the following requirements are set to ensure that students demonstrate competency in the professional curriculum. Students are expected to adhere to all the academic requirements stated in the Rutgers University/School of Health Professions Student Handbook. The following items are requirements that specifically relate to the Occupational Therapy Doctoral Program.

SHP and OTD Program Academic Integrity

As students in the School of Health Professions, you have accepted the responsibility for honesty and integrity in all aspects of the learning process. Each student will be held responsible for the personal and professional integrity of the work accomplished in all courses, examinations and other academic activities, that are part of the process by which they receive evaluation and credit. Please see the School of Health Professions Faculty and Student Honor Code: [Academic Integrity](#)

Breaches of Academic Integrity may lead to disciplinary sanctions including dismissal from the program. The SHP policy of warning, probation, and dismissal is available at: [SHP Policy](#)

Anti-discrimination Policy

Rutgers University, faculty and staff are committed to helping to create a safe learning environment for all students and for the entire community. If you have experienced any form of gender or sex-based discrimination or harassment, including sexual assault, sexual harassment, relationship violence, or stalking, know that help and support are available. The Rutgers Student Policy Prohibiting Sexual Related Misconduct can be found at: [Sexual Misconduct](#). Rutgers has staff members trained to support survivors in navigating campus life, accessing health and counseling services, providing academic and housing accommodations, and more. The University strongly encourages all students to report any such incidents to the University. The most efficient method to file a report is via this link: [Incident Report](#).

Please be aware that all Rutgers employees (other than those designated as confidential resources such as advocates, counselors, clergy and healthcare providers) are required to report information about such discrimination and harassment to the University.

This means that if you tell a faculty member about a situation of sexual harassment or sexual violence, or other related misconduct, the faculty member must share that information with the University's Title IX Coordinator. If you wish to speak to a confidential employee who does not have this reporting responsibility, you can find a list of resources in Appendix A of the abovementioned policy.

For more information about your rights and our responsibilities at Rutgers, please go to [Rutgers University Reporting Responsibilities](#)

Confidentiality and Privacy

Students are to not share any program confidential information with others. This includes information about classmates, faculty/staff, patients, and all written skills/educational materials.

Health Insurance Portability and Accountability Act (HIPAA)

When working with patients and human subjects, all interactions are subject to HIPAA confidentiality and individual ethical and legal obligations. Health information at the University and all patient care sites are protected under the Health Insurance Portability and Accountability Act (HIPAA). The University is committed to providing students with notification of legal duties and privacy practices. Students are required to abide by HIPAA and are subject to disciplinary action for HIPAA violations. All students are required to complete the on-line HIPAA training on an annual basis thru the HealthStream Compliance trainings.

Communication Guidelines

As graduate students in a professional health care program, the development of proactive, respectful, and constructive communication strategies is critical to your success in the program and in your professional career. In accordance with Rutgers Health Standards, candidates must be able to communicate in spoken and written English with clarity, sensitivity, and accuracy to patients/consumers, caregivers, members of health care teams, faculty, staff, and peers from a variety of educational and cultural backgrounds and at their levels of understanding. Students are encouraged to initiate timely meetings with instructors or faculty advisors to address academic or personal issues that may impact their demonstration of content mastery or skill competence. All faculty members maintain specific office hours to meet with students. Students may sign up for appointments without prior faculty permission but are expected to keep their appointments. Phone messages, email, and written notes or feedback should contain appropriate identification and salutations. Faculty should be addressed by their formal academic titles as either 'Doctor' or 'Professor.' Students should use their assigned Rutgers email addresses for program communication and should allow up to 48 hours for faculty to respond to an inquiry.

The language used in everyday interactions with peers is as important as formal communication during your education and in the clinical setting. You are easily identified by others as an occupational therapy student in the University community, and as such should be mindful of your language. The use of foul or offensive language even in an informal situation is

inappropriate and is incongruent with the professional behavior you are expected to always exhibit.

Language in Reference to Disability

The program supports the use of both person-first and identity-first language to refer to people with disability, or disabled people. People with disability often have very strong preferences for either identity-first, or person-first language. Non-disabled people need to be led by their respect and affirmation of each individual person with disability's choice of language they use about themselves. In any case, a person should not be referred to by disability or condition. Instead, they should be referred to either person first (e.g., person with multiple sclerosis or a patient with cardiac disease). Or identity first (e.g., Autistic person). Terms that could be considered biasing or discriminatory should not be used in any setting.

Conflict Resolution

Under RBHS policy, each Dean has appointed an ombudsperson as a designated, confidential resource for students and visitors seeking information or solutions to problems. The unique nature of the ombudsperson is one of neutrality, impartiality and independence from the Schools' and University's established administrative structures. The ombudsperson does not represent the student's interests, is not an agent of the institution and is not responsible for academic or disciplinary decisions concerning students or visitors. The ombudsperson is independent of all administrators who have notice, compliance, regulatory, enforcement, adjudicatory and disciplinary functions such as deans or program directors.

The ombudsperson identifies options, provides information, refers to other resources, facilitates communication between people, may mediate disputes or negotiate resolutions between parties, and recommend changes in policy or procedure to School/University administrators.

The assistance of an ombudsperson is informal and non-adversarial, separate from existing formal grievance and complaint procedures. Complaints or problems brought to the attention of the ombudsperson do not constitute placing the University on formal notice. Students and visitors can always pursue formal procedures. Sometimes the ombudsperson may recommend

this course of action and refer the visitor to the appropriate office. The ombudsperson will not participate in a formal proceeding.

Additionally, the ombudsperson shall maintain confidentiality to the extent permitted by law.

The SHP Ombudsperson is **Brittany Stone**. Ms. Stone may be reached by telephone at 856.566.6440 or brittany.stone@rutgers.edu

Evidence-Based Practice

Critical to service delivery is the use of best practices and evidence-based procedures. The principles for evidence-based clinical service learned in **OTDR 5321 (Quantitative-Scholarship & Evidence Based Practice)** are to be used throughout all coursework and clinical experiences.

Clinical Documentation

Many sites have electronic documentation systems that are HIPAA compliant cloud platforms, to maintain all clinical documentation and client records. Students are responsible for ensuring the confidentiality of all clinical documentation. All client contact and diagnostic information should be entered accurately. Feedback on clinical documentation will be provided to students by the fieldwork educator. Once a final draft is approved by the supervisor, all documentation should be finalized and signed by the student and supervising OT. The RU OTD Program uses the Subjective, Objective, Assessment, Plan (SOAP) progress note format. Clinical sites may use a different format for documentation. Students are required to complete documentation according to a site's timelines, policies, format, etc.

Interpretation Information

For the clients/families of clients that speak other languages Rutgers has a translation line that can be utilized during any session to communicate with clients and families. Phone Number: (866) 455-8165.

Emergency Response Protocol

In case of an emergency with a patient or non-patient at the clinic, the following actions should be taken:

- The person first on scene OR with the patient/individual at the time of the incident takes charge. This person stays with the patient/individual and makes sure they are safe and stable (performing CPR and First Aid as necessary) and assign the following:
 - One person to call 911 and go direct them into the building if necessary.
 - One person gets the AED if necessary (located on campus and are well marked)
 - One person alerts the Clinic Supervisors/Fieldwork Educators and help keep others from congregating near the scene.
- After Emergency Personnel arrives and take over, relay any necessary information to them then fill out an Incident Report Form.
 - The incident report should include a date and a detailed description of the incident, including participants, place, and other important information required to fully depict the experience. An incident report will be filled out by the supervisor. AEDs are located at most sites and within most facilities and are well-marked. In the event of an emergency while at a clinical site, the procedures of the facility should be followed. The incident at the facility must be reported to the supervisor as soon as possible, and an incident report will be filled out as appropriate. Information about Rutgers Public Safety is available at [Rutgers University Public Safety](#)

General Fieldwork Roles, Responsibilities and Expectations

Students participating in this clinic are expected to abide by OTD programs Code of Ethics. The Program supports and reflects the policies of the AOTA and SHP. As such, we support and promote adherence to the Code of Ethics adopted by AOTA (AOTA, 2015) [AOTA Code of Ethics](#)

The code of ethics serves two purposes 1) It provides aspirational Core Values that guide members toward ethical courses of action in professional and volunteer roles. 2) It delineates enforceable Principles and Standards of Conduct that apply to AOTA members.

As a student, and member of AOTA you will be expected to embody these core values and be aware of how they are enacted and evaluated.

LEVEL I FIELDWORK

Level I Fieldwork Description

Level I fieldwork is a vital part of the OTD program curriculum focused on helping to introduce students to the fieldwork experience, to apply knowledge to practice and to develop understanding of the needs of the clients. Level I fieldwork is not meant to create independent clinicians but to participate in directed observation and participation.

There are four Level I experiences: A, B, C, and D. These courses are completed throughout the curriculum and are paired with corresponding curriculum classes (physical disabilities, older adults, pediatrics, and community-based practice). The OTD faculty all contribute to the design of semester fieldwork objectives and assignments, and each course integrates field experiences with course content.

Each of these Level I experience may include experiences directly related to occupational therapy or settings that provide education on the developmental stages, tasks, and roles of individuals throughout the life span. Level I fieldwork can occur in a variety of sites, including but not limited to day care centers, schools, neighborhood centers, hospice, homeless shelters, community mental health centers, and therapeutic activity or work centers. As per AOTA guidelines, Level I Fieldwork supervision may be provided by any of the following: academic or fieldwork educators, occupational therapy practitioners initially certified nationally, psychologists, physician assistants, teachers, social workers, nurses, physical therapists, social workers, etc. Level I fieldwork can also be completed with direct contact with patients or through simulated casework paired with a hands-on evaluation of skills.

Rutgers' OTD program utilizes a didactic approach to Level I fieldwork offering direct patient care opportunities, simulated case studies, hands-on skill evaluations, and live simulated case projects. Our faculty believes having an approach that utilizes both the virtual and real world will decrease the burden on occupational therapy clinical educators while also ensuring students can a variety of learning experiences to improve clinical skills.

Course Title	Descriptions	Semester/ Year	Credits
OTDR 5319	Physical Disabilities	Spring/ 1 st Year	1
OTDR 5329	Older Adults	Summer/ 1 st Year	1
OTDR 6439	Pediatrics and Adolescents	Fall/ 2 nd Year	1
OTDR 6349	Community Based Practice	Summer/ 2 nd Year	1

Level I Fieldwork Learning Outcomes

Level I A Fieldwork 5319: Physical Disabilities

1. Demonstrate knowledge and understanding of the role of OT in varied practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and populations' functional outcomes.
4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.
6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.
7. Demonstrate entry-level clinical competence, professional behaviors and leadership abilities through a combination of academic and fieldwork education culminating in meeting established professional criteria.
8. Analyze the effects of commonly seen physical and mental health disease processes on occupational performance for children and adults, within the context of communities and social groups. (B.2.6)
9. Engage in scholarly endeavors to interpret and apply evidence-based practice data to OT

practice.

10. Demonstrate professional written and verbal communication skills in writing through organizing, thinking critically, and communicating ideas and information in documents and presentations.

Level I B Fieldwork 5329: Older Adults

1. Demonstrate knowledge and understanding of the role of OT in a variety of practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and populations' functional outcomes.
4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.
6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.

Level I C Fieldwork 6439: Pediatrics and Adolescents

1. Demonstrate knowledge and understanding of the role of OT in a variety of practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and

populations' functional outcomes.

4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.
6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.
7. Demonstrate professional written and verbal communication skills in writing through organizing, thinking critically, and communicating ideas and information in documents and presentations.
8. Use of sound judgment regarding safety of self and others and adhere to safety regulations throughout the occupational therapy process.

Level I D Fieldwork 6349: Community-based Practice

1. Demonstrate knowledge and understanding of role of OT in a variety of practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and populations' functional outcomes.
4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.

6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.
7. Demonstrate professional written and verbal communication skills in writing through organizing, thinking critically, and communicating ideas and information in documents and presentations.
8. Use sound judgment regarding safety of self and others and adhere to safety regulations throughout the occupational therapy process.

Level I Fieldwork: Student Responsibilities

- Fundamentals of Practice
 - 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.
 - Follows FW setting's policies and procedures for client safety. Demonstrates awareness of hazardous situations, and reports safety issues to supervisor.
- Foundations of Occupational Therapy
 - Verbalizes definition of occupational therapy as relevant to FW setting or audience.
 - 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.
- Professional Behavior
 - Be prompt, arriving and completing assignments on time.
 - set priorities, be dependable, be organized, and follow through with responsibilities.
 - Apparent level of interest, level of active participation while on site, and investment in individuals and treatment outcomes.
 - Take responsibility for own learning and to demonstrate motivation.
 - Use self-reflection; ask questions; analyze, synthesize, and interpret information; and understand OT process.

- Use proper grammar and spelling, legibility of work, successful completion of written assignments, and documentation skills.
- Initiative, seek and acquire information from a variety of sources, and demonstrate flexibility as needed.
- Observe relevant behaviors related to occupational performance and client factors and to verbalize perceptions and observations.
- Give, receive, and respond to feedback; seek guidance when necessary; and follow proper channels of communication.
- 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.
- 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.
- Respect confidentiality; appropriately apply professional terminology (e.g., *Occupational Therapy Practice Framework* terms and OT acronyms/abbreviations) in written and oral communication.
- Screening and Evaluation
 - Contributes to screening/evaluation process.
 - Communicates observations.
 - Identifies resources for evaluation process. Could include chart review.
 - Completes an interview and drafts an occupational profile.
 - Identifies potential goals from evaluation process.
 - Drafts documentation consistent with practice setting.
- Intervention
 - Contributes to intervention process.
 - Could include preparing clinic area and identifying resources and evidence.
 - Identifies interventions consistent with client evaluation and goals.
 - Identifies (verbal or written) interventions consistent with client-centered approach and provides clinical reasoning for interventions identified.

- Engages in and values evidence-based practice by seeking evidence to support or negate intervention approach.
- Administers interventions that are occupation-based and client-centered within guidelines of facility.
- Recognizes (verbal, written, or demonstration) need to modify interventions on basis of client response.
- Recognizes (verbal, written, or demonstration) need to modify or terminate intervention plan on basis of client response.
- Drafts documentation for intervention using typical procedures used in FW practice setting.

Level I Fieldwork Assignments

Assignments are based on the designated fieldwork course, therefore assignment details and grading policies are to be followed by the syllabus, canvas site, and fieldwork manual. Examples of student assignments are listed below and can be completed within the designated fieldwork experience and course.

- AOTA Level 1 Fieldwork Competency Evaluation for OT & OTA Students (Pass/Fail)-Midterm
- AOTA Level 1 Fieldwork Competency Evaluation for OT & OTA Students (Pass/Fail)-Final
- AOTA Data Form
- Frame of Reference Assignment
- Facility Overview Form
- Intervention/Treatment Plans
- SOAP Note documentation
- Psychosocial Assignment
- Assessment/Initial Evaluation documentation
- Student Evaluation of the Fieldwork Experience
- Time Logs and Attendance

LEVEL II FIELDWORK

Level II Description

The goal of Level II Fieldwork is to develop competent, entry-level, generalist occupational therapists. The Level II Fieldwork experience is designed to promote clinical reasoning and occupational based practice, by giving students the opportunity to collaborate with an occupational therapy clinical educator and develop independent skills related to human occupation and performance. According to AOTA, this fieldwork experience gives OT students “the opportunity to develop increased knowledge, attitudes, and skills in advocacy, administration, management and scholarship.”

The OTD program is committed to creating fieldwork partnerships in traditional, nontraditional, and emerging settings.

Students will complete two Level II fieldwork experiences throughout their time at Rutgers focused on developing competent, entry-level occupational therapists. Prior to either Level II fieldwork experience, students will have completed three Level I fieldwork experiences. By completing these experiences first, the program wants to ensure that students are prepared with their clinical and critical thinking skills before entering their first level II fieldwork. This timeline is designed to increase students’ success when participating in their Level II fieldwork experiences. The timing of these fieldwork experiences also ensures that students will have completed much of their didactic curriculum prior to their Level II fieldwork experiences. All courses in the curriculum are designed to improve and support the students’ success during these critical experiences.

Each Level II fieldwork will consist of 12 weeks of hands-on experiences that will provide application of concepts and principles learned in the academic program. Under the supervision of a licensed occupational therapist, students will further develop professional behaviors, clinical reasoning, and clinical skills to provide occupational therapy intervention services in a traditional or emerging area of practice.

It will be the responsibility of the academic fieldwork coordinator to ensure that fieldwork sites

are integrated with the curriculum and to ensure that the sites meet each student's learning needs.

Course Title	Descriptions	Semester/ Year	Credits
OTDR 6519	Level II Fieldwork 1	Spring/ Year 2	12
OTDR 7529	Level II Fieldwork 2	Fall/ Year 3	12

Level II Fieldwork Learning Outcomes Level II 6519

1. Demonstrate knowledge and understanding of the role of OT in varied practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and populations' functional outcomes.
4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.
6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.
7. Demonstrate entry-level clinical competence, professional behaviors, and leadership abilities through a combination of academic and fieldwork education culminating in meeting established professional criteria.
8. Analyze the effects of commonly seen physical and mental health disease processes on occupational performance for children and adults, within the context of communities and social groups.
9. Engage in scholarly endeavors to interpret and apply evidence-based practice data to OT practice.

10. Demonstrate professional written and verbal communication skills in writing through organizing, thinking critically, and communicating ideas and information in documents and presentations.
11. Use sound judgment regarding safety of self and others and adhere to safety regulations throughout the occupational therapy process.

Level II Fieldwork Learning Outcomes Level II 7529

1. Demonstrate knowledge and understanding of the role of OT in varied practice settings.
2. Articulate and apply occupational therapy theory, client-centered evaluation, and OT practice-related evidence to formulate, implement and modify occupation-based interventions.
3. Demonstrate effective interdisciplinary collaboration skills to maximize OT clients' and populations' functional outcomes.
4. Demonstrate an emerging understanding of task analysis in areas of occupation, performance skills, performance patterns, activity demands, context(s) and environments, and client factors in required course assignments.
5. Discuss with fieldwork educator observations based on appropriate theoretical approaches, models of practice, and frames of reference to develop occupation-based intervention plans and strategies based on the stated needs of the client and family as well as data gathered during the evaluation process.
6. Demonstrate the ability to effectively utilize available community resources and create/generate new resources to meet the needs of OT clients and populations.
7. Demonstrate entry-level clinical competence, professional behaviors, and leadership abilities through a combination of academic and fieldwork education culminating in meeting established professional criteria.
8. Analyze the effects of commonly seen physical and mental health disease processes on occupational performance for children and adults, within the context of communities and social groups.
9. Engage in scholarly endeavors to interpret and apply evidence-based practice data to OT practice.

10. Demonstrate professional written and verbal communication skills in writing through organizing, thinking critically, and communicating ideas and information in documents and presentations.
11. Use sound judgment regarding safety of self and others and adhere to safety regulations throughout the occupational therapy process.

Level II Fieldwork Responsibilities

- **Fundamentals of Practice**
 - Adheres consistently to the AOTA Code of Ethics and site's policies and procedures.
 - Adheres consistently to safety regulations and uses sound judgment to ensure safety.
 - Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents.
- **Basic Tenets**
 - Articulates the values, beliefs, and distinct perspective of the occupational therapy profession to clients and other relevant parties clearly, confidently, and accurately.
 - Articulates the value of occupation as a method and desired outcome of occupational therapy to clients and other relevant parties clearly, confidently, and accurately.
 - Articulates the role of occupational therapy practitioners to clients and other relevant parties clearly, confidently, and accurately.
- **Screening and Evaluation**
 - Articulates a clear and logical rationale for the evaluation process based on client information, contexts, theories, frames of reference, and/or practice models.
 - Obtains sufficient and necessary information from relevant sources throughout the evaluation process.
 - Selects relevant screening and assessment tools based on various factors.
 - Determines the client's occupational profile and occupational performance through interview and other appropriate evaluation methods.

- Evaluates and analyzes client factors and contexts that support or hinder occupational performance.
- Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable.
- Modifies evaluation procedures based on client factors and contexts.
- Interprets evaluation results to determine the client's occupational performance strengths and challenges.
- Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance.
- Intervention
 - Articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence.
 - Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models.
 - Uses evidence from research and relevant resources to make informed intervention decisions.
 - Selects client-centered and occupation-based interventions that motivate and challenge the client to achieve established goals that support targeted outcomes.
 - Implements client-centered and occupation-based intervention plans.
 - Chooses and, if needed, modifies intervention approach to achieve established goals that support targeted outcomes.
 - Modifies task and/or environment to maximize the client's performance.
 - Modifies the intervention plan and determines the need for continuation or discontinuation of services based on the client's status.
 - Documents the client's response to services in a manner that demonstrates the effectiveness of interventions.
- Management of Occupational Therapy Services
 - 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.

- 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.
- Demonstrates knowledge about the organization.
- Meets productivity standards or volume of work expected of occupational therapy students.
- **Communication and Professional Behaviors**
 - Communicates clearly and effectively, both verbally and nonverbally.
 - Produces clear and accurate documentation.
 - Collaborates with fieldwork educator(s) to maximize the learning experience.
 - Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with fieldwork educator(s) and others.
 - Responds constructively to feedback in a timely manner.
 - Demonstrates consistent and acceptable work behaviors.
 - Demonstrates effective time management.
 - Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.
 - Demonstrates respect for diversity factors of others.

Level II Fieldwork Assignments

Assignments are based on the designated fieldwork course, therefore assignment details and grading policies are to be followed by the syllabus, canvas site, and fieldwork manual. Examples of student assignments are listed below and can be completed within the designated fieldwork experience and course.

- Time logs and Attendance
- Patient Logs
- Student Evaluation of the Fieldwork Experience
- Student Evaluation of the Fieldwork Educator
- Midterm Supervision Form

- AOTA Fieldwork Data Form
- Facility Overview Form
- Student Orientation Checklist
- Level II Fieldwork Guideline Form
- Fieldwork Objectives
- Level II Fieldwork Weekly Schedule
- In-Service
- AOTA Fieldwork Performance Evaluation (Pass/Fail)-Midterm
- AOTA Fieldwork Performance Evaluation (Pass/Fail)-Final

STUDENT PLACEMENT PROCESS

Clinical Education Advisement

Clinical Education Advisement is an internal component to the fieldwork placement process.

Within the first two semesters of the program, all students will meet individually (in-person or virtually) with the Academic Fieldwork Coordinator. This meeting will be used to discuss students' clinical interests, past observations, or clinical experiences, possible fieldwork housing sites, the student's strengths and areas of need, and any concerns about fieldwork. This meeting will be proceeded by the student needing to complete the required fieldwork forms. Those students who do not complete the forms and/or complete the advisement meeting may face delays in fieldwork assignment and graduation.

Site Selection

Students can review potential clinical education placement opportunities through the Exxat system. Students are encouraged to research the clinics using the Exxat platform as well as the clinics' websites.

Students cannot be placed at a site where they have had either volunteer or work experience. They also cannot be placed at sites where they have family members who work there.

Students can provide input as to where they would like to complete their clinical education experiences. However, the Academic Fieldwork Coordinator cannot guarantee placement at those sites. There are many factors that impact student placement, including, but not limited to site staffing, site availability, site suitability and current contractual status.

Site Placement

Site placement will be determined by several factors including student interests, site availability, site requirements, potential site interviews, student competencies, faculty recommendations, and the Academic Fieldwork Coordinator's discretion for "best-fit." Site placement is the responsibility of the Academic Fieldwork Coordinator. While student interests are considered in the process, they are not guaranteed.

The coordination of clinical experiences is accomplished through the cooperation of the University, clinical sites, and students. Each student is responsible for the timely submission of all placement forms, compliance documents and required information. Late submission of required information may delay clinical education processes and limit the student's options for clinical sites.

Site placement is coordinated between the OTD Program, the site, and the students. Please be aware that sites/facilities can change the circumstances of the placement at any time. This includes fieldwork slot cancelations, time frame changes, fieldwork educator changes, and more.

Travel Requirements and Opportunities

When filling out the initial Fieldwork paperwork, students will be asked to consider potential alternate addresses that could be used for Fieldwork placements. Having multiple possible address locations increases the student's chances of getting a preferred fieldwork site.

For this program, we cannot guarantee location or commute time. A commute of one and a half hours from the home address or Program's campus is considered local for fieldwork placement purposes. The Academic Fieldwork Coordinator will work to limit travel commutes where possible; however, no guarantees can be made.

Additionally, while public transportation needs are taken into consideration, fieldwork placement at a site solely accessible by public transportation cannot be guaranteed. Use of public transportation may also lengthen commute times and is not necessarily accounted for when placing a student within the 90-minute commute timeframe when accessible by car.

Students who wish to travel to sites outside of this range, to different parts of the country, or out of the country, need to provide this information to the Academic Fieldwork Coordinator as soon as possible.

In all clinical placements, the cost of travel, housing, meals, and any other costs related to the clinical experience shall be the responsibility of the student.

Cancellations

At any time prior to or during your fieldwork, a placement may be cancelled by the site. The faculty has no control over a cancellation made by a fieldwork site. When a fieldwork cancellation occurs, the Academic Fieldwork Coordinator reassigns the student(s) as soon as possible. As the placement process can take considerable time, students should be prepared that this may affect timing and progression in the program and plan accordingly.

STUDENT REQUIREMENTS AND FIELDWORK POLICIES

Professionalism on Fieldwork

Fieldwork education is a vital part of the OTD curriculum. It is a requirement that students successfully complete fieldwork to graduate from the OTD Program. Knowing that, the Fieldwork Educators have volunteered to offer their expertise to each of our students. All students should demonstrate appreciation by being respectful, courteous, and actively involved in their clinical education experience. Students are expected to treat their educators and coworkers with dignity and respect; and their coworkers and educators are expected to treat students with dignity and respect as well.

When a student is at their clinical site, they are a representative of the University, School,

Program, and the OT profession and must behave in a professional, ethical, dignified, and respectful manner at the fieldwork site and in accordance with the American Occupational Therapy Code of Ethics (AOTA, 2015).

Professional behavior expectations, include but are not limited to:

- Respect to all clients, coworkers, and Fieldwork Educators
- Professional communication with coworkers, clients, and Fieldwork Educators
- Good conflict management skills
- Adherence to HIPPA laws and patient's rights
- Adherence to the fieldwork site's rules and regulations
- Proper attire
- Clean, professional appearance
- Timeliness
- Attendance
- No use of cell phones, smart phones, or text messaging during fieldwork. The expectation is that these technological items are stored and only used during lunch and breaks.
- Respect for the fieldwork site's equipment and supplies.

Any student who behaves in a manner that is not professional, respectful, or courteous may be dismissed from and shall expect to fail fieldwork regardless of performance in other skill areas. Dismissal on the grounds of professionalism is at the discretion of the Fieldwork Educator and/or Academic Fieldwork Coordinator. **Unprofessional behavior and practices will result in a course failure** and/or disciplinary action from the university.

Attendance and Tardiness

Attendance at all fieldwork education sessions is mandatory. An absence of more than one day requires a doctor's note.

Each student is expected to arrive on time and remain for the entire day at fieldwork.

Tardiness is not accepted and has consequences that can include dismissal from the fieldwork site.

Leaving a fieldwork site early to attend to personal business is not permitted. Taking unexcused or lengthy breaks is not acceptable.

If a student must be absent or late due to illness or an emergency, the following procedure must be followed:

- If an absence is anticipated, the student must report this in advance to the Fieldwork Educator and Academic Fieldwork Coordinator so that arrangements for make-up can be made.
- If an absence is sudden, the student must inform the Fieldwork Educator by calling the site 15-30 minutes before the scheduled start of the day.
- If a message is left, the student must call again later to ensure the message was received. The student must notify the Academic Fieldwork Coordinator of the day missed and the scheduled makeup date.
- Should the site have specific procedures for calling out, these take precedent over Rutgers policy, however, the Academic Fieldwork Coordinator must be notified either way.

The OTD Program permits students a one-day absence from Level II fieldwork due to illness or personal emergency. Additional time taken due to illness or personal emergency must be made up. Time can be made up by working additional hours, working additional days, at times by adding days to a subsequent rotation, and infrequently through completion of a relevant project which adds to your growth as an entry level practitioner in the given setting. Students should refrain from scheduling any event which would result in missed days on fieldwork.

Planned absences are not permitted except in the case of extraordinary circumstances and when previously approved by the Academic Fieldwork Coordinator and fieldwork site. In cases where time must be made up after term completion, a grade of “incomplete” will be given for the Level II Fieldwork. All time must be made up within two weeks of the scheduled end of the experience except for any days that are first approved and excused by the fieldwork site according to site specific policy.

Currently, Rutgers University recognizes the following holidays:

- New Year's Day
- Martin Luther King Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Friday after Thanksgiving Day
- Christmas Day

Students are required to make up time off from fieldwork when their facility is closed for the above holidays. If the student's fieldwork educator is working during these holidays, the student is expected to work, unless the fieldwork educator makes the decision not to have the student work.

If the student's fieldwork educator is working during the weekend, the student is expected to work, unless the fieldwork educator makes the decision not to have the student work.

Dress Code

Each student must abide by the following guidelines for the professional dress code that is required when participating in fieldwork education. The fieldwork site may request that a student wear a specific uniform, and/or alter dress code in compliance with site requirements. Each student must check with the fieldwork educator regarding the dress code prior to the first day of fieldwork.

- Students are to wear a red or black polo shirt and khaki or black professional pants unless noted otherwise by the facility. (If a facility requests a certain dress code, then the student is to abide by the facility dress code)
- The Rutgers ID Badge and site badge (if appropriate) must always be worn.
- Clothing, including uniforms, must be clean, always pressed and in good condition without rips or tears. Undergarments must be always worn. Attention should be given to avoid

wearing patterned or bright undergarments under light colored clothing. White crew neck/V-neck undershirts or camisoles must be worn under light colored shirts. Athletic wear is inappropriate for the workplace, including sweatshirts, sweatpants, leggings, jeggings, yoga pants, shorts, jogging suits, etc. Jeans, crop tops, halter tops, tank tops, etc. are not acceptable. Skirts or skorts may not be shorter than three inches above the knee.

- Artificial nails, acrylic nails, wraps, gel overlays, raised nail jewelry are not permitted on all direct patient care team members. Fingernails must be cleaned and trimmed to the activity length (no longer than 1/8 inch) so as not to interfere or affect the comfort or safety of guest/patient or team members. Nail polish, if worn, must be free of chips. Fingernails longer than 1/4" are not permitted.
- Comfortable, stable shoes must be worn with non-slip soles. Open toe shoes are not permitted.
- Clothing that will allow modesty and ease of movement when working with clients must be worn.
- Hair and Head Wear: Hair must be clean and neat with no extremes in style, bleaching, coloring, or ornamentation. For direct patient care staff and where necessary, hair should be pulled back and secured so as not to interfere with guest/patient care. Facial hair and mustaches are permitted but must be trimmed and not present a bushy or unkempt appearance. Facial hair should not include any rubber bands, beads, or braids. Facial hair that may interfere with the integrity of the skin mask seal (respirator) as determined by Occupational Health will not be permitted. Hats, bandannas, and headdress are not permitted unless part of religious accommodation or if required in some positions to complete a uniform, i.e., security.
- Personal cleanliness and hygiene must be always maintained. Every effort should be made to avoid offensive body odors through the regular practice of sound personal hygiene and using deodorants and other toiletries. Perfumes should not be used in a manner which would adversely affect the comfort and/or safety of guests/patients or team members. Oral hygiene is mandatory for all students.
- Long dangling earrings and excessive jewelry must not be worn. Jewelry is generally permitted provided the type, style and quantity is appropriate to the team member's work

environment. Team members may not wear nose jewelry other than a small stud. Earrings will not be permitted on any other exposed body part but the ear lobe (i.e., eyebrows, lips, and body). No more than two sets of small conservative earrings are permitted on team members. Jewelry that inhibits the effective practice of universal precautions, including infection control, or any other safety procedure is prohibited. In all cases, medical alert jewelry is acceptable.

- No body art/tattoos which reasonably is or should be known to be offensive because of its sexual, violent, religious, racial or ethnic content, or its relationship to gender, sexual orientation or disability or based on any other protected category may be visible at any time. This includes but is not limited to sexually explicit or lewd material, or that promote or advocate sexism, racism or other forms of bigotry based on gender, age, race, religion, disability, sexual orientation or other protected category as legally defined or otherwise contrary to common sense standards of professionalism.

FIELDWORK COMPLIANCE DOCUMENTS

Many clinical fieldwork sites mandate student compliance with health, background, and other training requirements prior to allowing the student to begin a clinical experience. Noncompliance with these requirements may result in the inability to begin the experience. Fieldwork compliance documents should be uploaded to Exxat for Academic Fieldwork Coordinator review, as well as to the School of Health Professions website. Fieldwork Compliance Documents should be uploaded by the end of the Fall semester, during the student's first year of the program. If a student chooses to not upload Fieldwork Compliance Documents, they must physically show the clearances to the Academic Fieldwork Coordinator. It is the Academic Fieldwork Coordinator's duty to check off and sign clinical attestation forms for clinical fieldwork sites. Attestation forms cannot be completed without document/compliance approval. Failure to upload documents and/or show the Academic Fieldwork Coordinator compliance documents may result in a fieldwork delay, which also has the potential to delay graduation.

Health Information

Students are expected to adhere to all the health, immunization, vaccination, and health insurance policy requirements of Rutgers University. These must remain current, and may not

expire, during the clinical experiences. The University may hold registration for academic or clinical courses if health and immunization requirements are not met, resulting in a delay in beginning clinical experiences, continuing in the program, and/or graduating. For a complete list of the University's requirements, please refer to the current Student Handbook or contact the Student Health and Wellness Center.

Students are responsible for maintaining copies of their physical examinations and immunization records, and to provide them to the clinic upon request. The Program does not maintain copies of these records.

There may be additional, specific health requirements for clinical sites. These will be communicated to you directly by the clinic. It is the student's responsibility to obtain all necessary tests and provide the results directly to the clinic within their required timeframes.

COVID 19 Vaccine Announcement

Please be advised that most fieldwork sites require the COVID19 vaccine. At this time, the OTD program cannot guarantee fieldwork placements for students who choose not to vaccinate.

Criminal Background Check

Students who are required to submit a criminal background check for fieldwork may go through Rutgers SHP Enrollment for this service. It is the student's responsibility to provide the results of this screen directly to the site and to conform to site standards. Students should submit for an updated criminal background check on file with Rutgers SHP Enrollment annually to avoid any delays in fieldwork onboarding. Subsequent criminal background checks are offered at no cost through Rutgers SHP Enrollment.

Please note, if you are placed for fieldwork in a school, most schools will only accept criminal background checks completed through the New Jersey Department of Education. These are completed at the student's own cost.

In case where a criminal background check comes back with unfavorable result, please refer to school policy found at link below for subsequent procedures and potential impact: [Criminal Background Check](#)

In addition to school level review, it is highly suggested that any student with an unfavorable background check complete NBCOT's early determination review to ensure eligibility to sit for the national board exam. This is completed at the student's own cost. The form can be found at: [NBCOT Exam Eligibility Form](#)

Fingerprinting

Some clinical sites will require that the student have fingerprinting performed prior to the start of the clinical experience. The student must find out from the site if there is a specific or recommended vendor through which this should be completed. Rutgers School of Health Professions does NOT perform fingerprinting for students. Students will incur the cost of fingerprinting.

Drug Testing

Clinical sites may require Drug Testing and/or Criminal Background Checks ("CBC") prior to commencing the clinical experience. It is each student's responsibility to conform to the site's requirements and to provide the results of these screens directly to the site.

Some sites will accept the criminal background check that was obtained at the time of admission to the program. The student must obtain this from the University's Office of Enrollment Services and submit it to the site upon request. Other sites may ask for a more recent CBC and/or a drug screen to be run and may specify parameters and time frames for completion prior to the start of the experience. It is vital that the student tracks and completes these screens precisely in accordance with each clinical site's specific requirements.

It is advised that students have these tests run through the Rutgers SHP Office of Enrollment Management (Phone number: 973-972-7940). However, other vendors may be required,

recommended by, or acceptable to, the clinical facility. Students may incur the costs of testing if not performed through the Office of Enrollment Management.

CPR Certification

Each student is required to be certified, update and maintain certification in cardiopulmonary resuscitation (CPR) for the healthcare provider with application to the infant, child and adult.

Courses are offered by the American Heart Association and Red Cross. Evidence of certification and ongoing certification must be uploaded to the Typhon System. Any student who does not complete CPR certification cannot begin fieldwork and this may result in a failing grade for this class. Please note, some fieldwork sites may only accept CPR certification from specific organizations.

Interviews

Some fieldwork sites require interviews for acceptance into their educational opportunities. If a student applies for one of these sites, it is expected they complete the interview with respect and professionalism. The students may have to travel to interviews and incur extra costs for this travel. The scheduling of these interviews will take place between the facility and the student with the Academic Fieldwork Coordinator available to assist as needed.

Students can work with their Academic Fieldwork Coordinator or other faculty to prepare for these interviews. This preparation is highly recommended by the OTD program.

Acceptance into these fieldwork sites is at the discretion of the site and student should be prepared that interview does not guarantee admission to the facility as a fieldwork student.

Here are some interview strategies to consider:

- Share your interest in the specific setting (e.g. Hands/UE Rehab, Inpatient Acute Care, Outpatient, etc.).
 - Include your interest and/or experience level in your answer to the questions

- “Tell me a little about yourself.”
 - “How did you become interested in OT.”
 - “Why do you want to be placed at this specific site or with this specific population?”
- Research the site! Review the website and the mission of the company/facility/institution BEFORE the interview.
 - Have a list of questions ready (e.g. what kinds of assessments are used, what does the daily schedule look like, etc.).
 - Discuss your prior work experience with the specific population/setting.
 - Anticipate and review conditions common to the population/setting.
 - Review frames of reference, theories, and models of practice related to the population/setting.
 - Review relevant assessments for the population and/or setting.
 - Review types of interventions related to the population/setting.
 - Discuss course work related to the setting and/or population.

Common Interview Questions:

- What experience do you have with working in this kind of setting or with this specific population?
- Why did you choose to pursue a career in occupational therapy?
- How have you handled conflict or a difficult situation in the past?
- What are your strengths?
- What are the areas that need improvement? How does this impact your functioning/performance?

- How do you handle stress in the moment and during the day in high to medium-paced settings?
- How will you handle the workload/caseload, stress, and pace of the setting?
- What are your fieldwork goals for this experience?
- What are your professional OT goals for the future?
- What are your ideas for a capstone project?

Confidentiality, HIPAA, and Sexual Harassment Compliance Training

Students are required to always maintain patient confidentiality. Violations of the Health Information Portability and Accountability Act (HIPAA) are subject to specific federal penalties and civil liability. Discussion or posting of any patient-related information, photographs, or videos via social media is strictly prohibited.

Students are required to comply with the Rutgers University HIPAA and Sexual Harassment Compliance Training policies as noted in the Student Handbook. Some sites will require that students present evidence of completion of this training. In addition, some sites will require site- specific training modules to be completed prior to the start of the clinical experience. These will be communicated to you directly by the clinic. It is the student's responsibility to complete these training modules in a timely manner. For additional information about HIPAA: [Additional HIPAA Information](#)

The final decision as to whether the results of these pre-requisite tests are acceptable to the clinical site rests solely with the clinical site.

Use of Social Media, Photography, and Electronic Devices

Students are required to follow clinical site policies regarding social media, photography, audio recording, and/or use of any electronic communication devices. Discussion or posting of any patient-related information, photographs, recordings, or videos via social media is strictly

prohibited. Photography and audio recording in the clinical site are strictly prohibited unless explicit permission is provided by the clinical site and any photographic and/or recorded subjects.

Liability Insurance

All Rutgers Biomedical Health Sciences students completing fieldwork are covered by liability insurance which provides for limits of liability of not less than \$1,000,000/\$3,000,000.

Coverage is provided through a Program of Self-Insurance that is approved and guaranteed by the State of N.J. Treasury Department, specifically designated to pay for all claims of the University.

A student who wishes to participate in out-of-state clinical rotations as a part of the educational experience may be required to purchase liability insurance covering such activities and obtain a certificate of such insurance, naming Rutgers School of Health Professions and the clinical facility as certificate holders, prior to beginning the fieldwork.

ACCOMODATION FOR A DISABILITY ON FIELDWORK

Please review section the SHP Student Handbook regarding Services for Students with Disabilities.

Each fieldwork site has Essential Functions for Performance of an occupational therapy student. Disclosure of a disability to the Academic Fieldwork Coordinator and the Fieldwork Educator is strongly encouraged and is the responsibility of the student. When a student discloses a disability to both educators as described, the Academic Fieldwork Coordinator can collaborate with The Office of Disability Services when planning fieldwork, and with the Fieldwork Educator and the student to determine the need for any reasonable accommodation in meeting the essential functions of an occupational therapy assistant student at the fieldwork site. Regardless of accommodation, each student must meet the essential functions of the site and receive a passing grade on the fieldwork evaluation.

STUDENT SAFETY

Inclement Weather

Announcements regarding inclement weather emergencies are made on the Rutgers SHP website. Students are required to adhere to SHP inclement weather policy 60.1.29 and should use his or her judgment concerning safe travel to fieldwork when weather conditions are inclement. Some key points of the policy are listed below:

- If Rutgers' University declares a school closure due to weather emergency, students whose clinical placement is within the same geographic area are not required to attend clinical.
- Students in other geographic areas where a weather/state of emergency has been declared are not required to attend clinical rotation.
- In cases where the University does not declare an adverse weather emergency, cancel classes, and/or cancel outpatient services, students should follow the adverse weather procedures announced by their assigned clinical affiliate.

It is the responsibility of the student to contact the fieldwork supervisor concerning inclement weather and to arrange to make up missed work, and to alert their Academic Fieldwork Coordinator of the missed time and make up plan. Fieldwork educators are requested to notify students and the Academic Fieldwork Coordinator if their site is unexpectedly closed.

General Safety Information

Safety for the clients, other staff, and for students is of utmost importance. Each student is expected to adhere consistently to safety regulations, policies and procedures at the assigned fieldwork site. Fieldwork Educators must provide information about safety procedures, emergencies, fire, and patient incidents (or the student must ask). Each student must review and follow the fieldwork site's policies and procedures.

How to address safety concerns:

- Fieldwork Educators: If the fieldwork educator has a concern of the student's safety during any part of the clinical experience, the fieldwork educator should contact the Academic

Fieldwork Coordinator to set up a meeting to discuss safety concerns, and to create a remediation plan for the student. Depending on the severity of safety concerns, students have the potential to fail fieldwork.

- Students: If the student has a safety concern regarding the fieldwork educator or the facility they are placed at, they should immediately contact the Academic Fieldwork Coordinator. The student and Academic Fieldwork Coordinator will work together to create a plan to ensure a safe environment, or the student will be transferred to another facility, as needed.

Safety is also a critical component of the Fieldwork Performance evaluation. See the Fieldwork Performance Evaluation section for information on safety and the FWPE.

Infection Control and Safety

Students are taught the basics of infection control in their first fall semester. Universal precautions are always followed. Students are expected to follow the basics of infection control in all classroom and clinical settings. Students are expected to sanitize all therapy materials and areas used during the clinical session before and after each client encounter. Students are required to engage in proper hygiene and to wear gloves, as appropriate, to ensure student and patient safety.

Safety in a Clinical Setting

Client safety is of paramount responsibility. Students should not leave toys, electrical cords, or materials on the floor where they may be a fall hazard to others. When working with small children or older children or adults with developmental delay, students should not select materials with small parts that may be a choking hazard. Children under 18 as well as adult clients with reduced cognitive- communicative capacity should never be left unattended.

Sexual Harassment Policy

The University has a policy and guidance for students related to sexual harassment. Policy 60.1.12 In addition, further guidance is found in policy “Discrimination, harassment and other inappropriate workplace conduct” Policy #00-01-35-60:00

Incident Reports

If an accident occurs at a fieldwork site, the incident must be reported using the facility's incident report form, and a copy must be submitted to the Office of Risk and Claims Management, ADMC 1313, Newark campus, with a copy to the Office of the SHP Dean, and OTD Program Director. The Office of Risk and Claims Management should be contacted immediately if the accident involves injury, at (973) 972-6277. The Occupational Therapy Program Director should be contacted at (908) 889-2474 and/or the Occupational Therapy Assistant Academic Fieldwork Coordinator should be contacted at (908) 889-2525.

FIELDWORK EXPERIENCE MANAGEMENT AND ASSESSMENT

New Jersey Regulations for Supervision of OT Fieldwork Students

The State of New Jersey provides specific mandates for supervision of occupational therapy fieldwork students. The licensure regulations can be retrieved from the New Jersey Division of Consumer Affairs Occupational Therapy Advisory Council at

<http://www.njconsumeraffairs.gov/ot/Pages/regulations.aspx>

Copied from: NJ Division of Consumer Affairs Occupational Therapy Advisory Council

- Supervision means the responsible and direct involvement of a licensed occupational therapist with an occupational therapy assistant, a temporary licensed occupational therapist, a temporary licensed occupational therapy assistant, or an occupational therapy student fulfilling the required fieldwork component of his or her educational training, for the development of an occupational therapy treatment plan and the periodic review of that plan.
- Prior to supervising any person engaged in the practice of occupational therapy services, a licensed occupational therapist shall have at least 1,200 hours of work experience obtained in no less than one year and within three consecutive years of practice.
- A licensed occupational therapist may supervise five occupational therapy students who are fulfilling the required fieldwork component of their educational training.
- A designated supervisor shall maintain a written plan of supervision that shall include

evidence of the ongoing supervision of each occupational therapy assistant and temporary licensee for whom the supervisor is responsible.

- A licensed occupational therapist may delegate selected occupational therapy services to the license occupational therapy assistants and to occupational therapy students fulfilling the required component of their educational training, provided the services are within the scope of the practice of the individual to whom they are delegated.
- In delegating selected occupational therapy services, the licensed occupational therapist shall be responsible for exercising that degree of judgment and knowledge reasonably expected to assure that a proper delegation has been made.

Fieldwork Educator Supervision Responsibilities

- Student orientation of facility, department & fieldwork.
- Review student learning outcomes and student expectations for this fieldwork/clinic
- Model informal information gathering.
- Review findings from student's chart review.
- Explain the intervention plan of assigned clients the student will be responsible for.
- Review any clinical competency checklists the facility might require.
- Review facility's documentation.
- Review assessment tools used for evaluations.
- Review any additional projects required.
- Schedule weekly supervision meeting.
- Set up student orientation with team members to review discipline roles and responsibilities.
- Set up student observation of an OT evaluation or re-evaluation (where possible).
- Discuss caseload the student will be assuming to enhance observation skills and implementation of intervention skills.
- Provide resources upon request.
- Role model intervention, scheduling and making changes to the daily schedule.
- Arrange for student to observe an evaluation and review observations/interpretations with student.

- Complete any clinical competency checklists if applicable.
- Collaborate with student to establish goals and review intervention plans.
- Role model reviewing of goals with the client in the clinic.
- Continue to review evaluation process.
- Provide feedback on intervention methods and techniques.
- Observe evaluation and provide feedback on evaluation and documentation of evaluation.
- Review documentation and co-sign.
- Collaborate with student on future intervention goals/progress of their clients.
- Review documentation and co-sign.
- Continue to increase competency in assessment goal writing and discharge planning.

Site Visits

Site visits are an important part of the clinical rotation experience. Site visits are made by the Academic Fieldwork Coordinator while students are participating in their Level 1 and Level II clinical rotations. These visits can be in-person or virtual visits. The site visit will include individual time between the Academic Fieldwork Coordinator and the student, then the AFWC and the fieldwork educator, and finally a group meeting between the AFWC, student, and the fieldwork educator.

The purpose of the site visits is to:

- support the student's transition from the classroom to clinical setting.
- monitor and support the student's performance.
- intervene and create remediation plans when safety, performance, professional, or supervisory issues arise.
- ensure the clinical placement is aligning with the objectives associated with Level I and Level II fieldwork.
- observe and determine if the supervision offered to the OTD students is appropriate.
- collaborate with and support the Fieldwork Educator in the role of supervisor, mentor, and educator.

Fieldwork Grading

Grading:

The Level I and Level II fieldwork courses have two graded components: an academic and fieldwork component. Students must pass both components to earn a satisfactory grade for the course.

Academic Component:

To receive a satisfactory grade in the academic component of this course, a student must turn in all required assignments by the assigned due date. Any score of a zero may result in an unsatisfactory score for the course regardless of performance on fieldwork. Incomplete assignments will not be accepted. Students must turn in items on time to earn full credit. Late items will be accepted with a 20% reduction in points per day late up to 3 days. No assignment will be accepted after 3 days. Students can earn an A or B grade for this course. The AU Department of OT does not accept any graduate course grade less than a B-.

Fieldwork Component:

Level I Fieldwork. For Level I fieldwork, the fieldwork component is pass/fail based on the Level I Fieldwork Competency Evaluation. Students will be scored in the areas of fundamentals of practice, basic tenants, professionalism, screening and evaluation, intervention, management of occupational therapy services, communication and professional behaviors. Students must receive a minimum of an “M” (meets expectations/criteria) in all areas to pass the fieldwork experience. Students that receive a “B” (below expectations) or a “U” (unsatisfactory) have not met the criteria needed for passing the Level I Fieldwork experience, which will result in a fieldwork failure. According to the student handbook, a fieldwork failure may delay graduation and may be grounds for dismissal from the OTD Program. Students should review the Level I Fieldwork Competency Evaluation prior to attending Level I Fieldwork to familiarize themselves with the scoring instrument. The Level I Fieldwork Competency Evaluation is administered at the final of the Level I placement. If concerns arise

throughout the fieldwork experience, the Level I Fieldwork Competency Evaluation may be used at midterm to assess skills, and/or may be combined with a learning contract.

Level II Fieldwork. The Level II Fieldwork Performance Evaluation (FWPE) is the standard instrument used by this OTD program during Level II Fieldwork experience. Students should review the FWPE prior to attending Level II to familiarize themselves with the scoring instrument. The FWPE is administered at the midterm and final of the Level II placement. Both the student and the Fieldwork Educator complete the FWPE at midterm and the final and compare their findings. The midterm scores will be used to create a learning plan that will assist the student with passing the final.

The Midterm FWPE Scoring.

- A sum of 74 or higher is an ideal indicator for a passing performance at midterm.
- A score of 2 or higher at midterm on the items:
 - Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations.
 - Adheres to safety regulations and reports/documents incidents appropriately.
 - Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents.
- A score of 1 in any area at midterm may indicate the need for the development of a learning success plan/contract, also known as an action plan.

The Final FWPE 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:
 - Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations.
 - Adheres to safety regulations and reports/documents incidents appropriately.
 - Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to prevent accidents.
- Scores of 1 on any of the items is not allowed to receive a Pass on the FWPE for OTS

For more information on the FWPE, visit AOTA's site: [AOTA FWPE](#)

Addressing Problems on Fieldwork

Fieldwork issues due arise between students, fieldwork educators, coworkers, and more.

When addressing these issues, it is important to approach the situation with respect and professionalism.

Students experiencing a problem with fieldwork should discuss the issue immediately with the Academic Fieldwork Coordinator and the Fieldwork Educator. Both educators can provide guidance in resolving the problem.

Fieldwork Educators who have concerns about their students performing below minimal acceptance or have other student concerns should take the following steps:

- Alert the student of the concerns/issues present. Each student must be notified of performance problems and/or potential failure so that every attempt can be made to resolve them. In some cases, the fieldwork time frame may be extended to allow for the demonstration of improvement of the fieldwork objectives.
- Allow students to work with the Fieldwork Educator to resolve issues.
- Notify the Academic Fieldwork Coordinator.

If a student and Fieldwork Educator cannot reach a resolution, the Academic Fieldwork Coordinator is available to assist in facilitate the development of a learning success plan/contract/agreement that provides a statement of the problem, learning resources and activities, learning/fieldwork criteria, and a timeline for improvement.

A student who chooses to leave a fieldwork placement without discussing the problem with the Academic Fieldwork Coordinator and Fieldwork Educator will receive a failing grade for the course.

Strategies for the Student and Fieldwork Educator—Navigating Fieldwork Challenges

In general, when a student is having difficulties on fieldwork, it is most helpful to provide feedback about their performance. Ideally, the student and Fieldwork Educator should work together to identify what areas the student needs to change (e.g. identify student strengths and areas of need). The student and the Fieldwork Educator should compare their own perceptions of the student's performance. Together, the student and the Fieldwork Educator should create a plan for improving identified areas of need, with detailed goals and objectives, a list of activities and steps to improve fieldwork competencies, and a defined timeline for expected completion. Regular communication and feedback, both verbally and in writing, is highly recommended for the student and the Fieldwork Educator. It may be helpful to consider using the weekly feedback form found on the Rutgers University OTD Fieldwork Website or located at the back of this manual.

Fieldwork Remediation Suggestions and Strategies

The following information was retrieved from the University of South Alabama's Occupational Therapy Program Fieldwork Website. Please see the following website for a direct link to the content related to fieldwork remediation suggestions and strategies (University of South Alabama, n.d.). The following information has been adapted to align with the program and meet the curricular needs of the Occupational Therapy Doctorate Program at Rutgers University.

[Link to the University of South Alabama OT Program Fieldwork Website](#)

Clinical Reasoning:

When a student is having difficulties with clinical reasoning, they are having trouble

synthesizing information. This means that the student may have difficulty sorting through all the information, selecting relevant details, and using their knowledge to guide them in making an appropriate decision. The breakdown could be in any of these components. Most often, these challenges can be improved when the student can identify what pieces of information they are not considering in the process. A review of that content can often help the student go back and rethink the case with a different perspective. Fieldwork Educators should ask the student many “why” questions about a case. Think about how one would logically analyze the information provided. What factors guided the reasoning process? The following should also simultaneously be considered:

- Client’s diagnosis (most recent and past relevant problems).
- Expected outcomes for this diagnosis.
- Client’s age, gender, education, and resources (family, financial, and environmental).
- Current context for OT service (out-patient, acute care, SNF, school, etc.).
- Relevant past medical history.
- Prior level of function.
- Current medications and side effects.
- Behaviors demonstrated by the client.

The next step is to analyze the above information and synthesize it with clinical observation and data collection information retrieved from an evaluation process or a treatment session. This helps to draw conclusions based on knowledge and experience. When choices need to be made, asking a series of questions can help with this process. Identify the steps in the process when the Fieldwork Educator’s thinking diverged from the student’s--this will help guide the student to review more specific content.

Activities to help improve clinical reasoning include asking the student to:

- Search the literature to find evidence about effectiveness of a specific intervention(s) and outcomes. Create an annotated reference list with this information.
- Make a one-page diagnostic summary of the disease or condition.

- Write out treatment activities prior to a therapy session and match which objectives from the client's chart are addressed by each activity. Specify how to grade each step to make it easier and harder. FW Supervisors can review this before treatment to make suggestions or ask questions. This should help the treatment session go more smoothly.
- Ask the student to give a rationale for choosing certain interventions. Can the student clearly articulate their rationale? If not, ask them to look up supporting information to discuss the next day.
- If students have trouble selecting appropriate assessment tools, ask students to compare 2-3 different tools. The student will need time to look at and review the assessment tools. Ask the student to provide a written typed summary (or any format that works for the fieldwork site) for this compare/contrast task.
- Develop a list of possible courses of action in an emergency.
- Have the student monitor and direct their own learning using learning objectives written related to clinical reasoning.
- Allow the student to watch a video of a patient assessment or treatment and ask them to analyze the procedure and write a summary of decisions made during the process and other possibilities to consider. Rutgers University OTD students have access to the ICE Video Library.
- Arrange for student to observe another therapist who can provide some role modeling of the reasoning process, in conjunction with talking aloud to help student follow the process.
- Ask the student to review patient charts and identify decision making of other therapists and document clues or specific details that influenced the decision.
- Given a potential problem. determine three possible solutions, as well as pros and cons for each solution.
- Utilize a case the student is familiar with and modify the information to include hypothetical changes in the case (e.g. age, gender, phase of recovery, context for delivery of OT services, roles and previous leisure interests, etc.) and ask the student to redesign components of the treatment plan with this new information. Can the

student shift their thinking process to include this new information and come out with a reasonable plan.

Intervention Deficits:

The fieldwork site's departmental policy and procedure manual may contain specific performance criteria for conducting evaluations or treatments. The student can use departmental policies and procedures to conduct a self-evaluation of the task. Feedback during the process (specifically if it is therapeutic handling) provided by a more experienced therapist may be necessary to correct errors and prevent the student from developing bad habits. A review of relevant content about a process can often help students revise their own performance.

Fieldwork supervisors should ask the student to demonstrate or show how to accurately conduct a skill when discussing interventions. Think about how a task should be performed. What factors helped to refine the procedures? It is common for Occupational Therapy Practitioners to revise their procedures, set-up, materials, etc. during a task, based on the performance of the client. More experienced therapists can make some of these adjustments related to therapeutic handling and patient positioning without much conscious effort, however, students must learn to attend to and adjust these procedures while engaged in the therapeutic activity.

Activities to help improve interventions include asking the student to:

- Practice specific tasks until a certain level of competency is reached.
- Allow student to watch a video of a role model/experienced practitioner conducting an intervention. Have the student record their observations about the Occupational Therapy Practitioner's performance.
- Ask the student to identify the steps of the task that the experienced practitioner executes more proficiently or accurately than they do. This will help the student identify what to practice. Have the student create a procedural checklist of the task for themselves and others. Ask the student to list the performance steps on the left

side of the form and include a checklist and comments column on the right side. The student could use this form to observe a practitioner and evaluate their own proficiency with the task-based checklist. The student can then ask a peer or other therapist to observe them perform the task and utilize the checklist and complete the comments sections to help them further define their need to practice.

- Ask the student to video themselves performing specific tasks. Ask them to critique themselves. Students can use the newly created checklist form to critique their own performance on the video.
- Ask the student to role-play the procedure with another student or therapist. If it is an assessment tool, have the subjects try to role-play a variety of responses during testing so the student learns to grade or score a variety of responses or learns when to discontinue or re-instruct according to the test manual. If it is a treatment technique, have the subjects show a variety of responses so the student learns to respond to different scenarios.
- Ask the student to write their own personal learning objective to measure improvements in performance. Be sure it includes measurable criteria, conditions, and timelines.
- Ask the student to provide evidence-based research to explain why they choose certain interventions.

Professional Behaviors:

When a student is having difficulties with professional behaviors, they are having trouble with their interpersonal communication. This means the student may be conveying an inappropriate attitude such as defensiveness, aggression, frustration, helplessness, or stubbornness and/or may be demonstrating poor time management, difficulties in organizational skills, and not adhering to dress code. Students may not be able to recognize these behaviors in themselves and may need their Fieldwork Educator to point these out and develop solutions to improve student success. Most often, professional behavior concerns can be improved when the student becomes aware, makes a conscious effort to change, and learns how to handle stressors. Although Fieldwork Educators may be uncomfortable providing feedback about professional behaviors, it is a necessary skill for the workforce and a graded

competency on both the Level I and Level II Fieldwork Performance Evaluations. The Rutgers University OTD Program takes professional behaviors very seriously. Professional behaviors are measured throughout each course and fieldwork experience.

Students are often stressed during their fieldwork experience. Students also have the tendency to become frustrated with themselves. It may be helpful for Fieldwork Educators to document concerns related to a student's professional behavior, including objective information about behavior, antecedents, triggers, responses, etc. When consulting a student about their professional behaviors, set a time to meet with the student in a private, quiet place. Be supportive but also be firm about what are acceptable and not acceptable behaviors in the clinic. Let them know you are interested in helping them change to show more acceptable communication. If you discover the student has problems that require professional counseling, contact the Rutgers University Occupational Therapy Academic Fieldwork Coordinator immediately.

Activities to help improve attitude include asking the student to:

- Review the RU OTD Program Professional Behavior expectations with the student. These behaviors are assessed and incorporated into all coursework and clinical experiences. Students also review the Professional Behavior form each semester during advising.
- Read the book "FISH" by Stephen Lundin.
- Read the book "Hidden Potential" by Adam Grant.
- Write a list of professional behaviors (not skills) that are expected from therapists. Ask them to review the list and choose areas they feel they need to work on. Identify resources and develop strategies to help improve this area.
- Read an article on stress management and implement some strategies.
- Make a one-page list of positive affirmations and post them where they can see them.
- Think of a role model they admire and list specific professional behaviors this person possesses. Think of a specific incident in which this person handled a difficult

situation very well. Describe in writing how the role model handled the situation and what was most impressive. What did the student learn from this model?

- Request opportunities to see role models of positive attitude in action. Next, journal a reflection of this experience and what they learned from this observation.
- Describe typical behaviors of a student that takes responsibility for their own learning. What would the responsible student do to demonstrate a positive attitude about learning and improving themselves? Now examine this list. Have the student underline those that they have demonstrated. Place a star next to those they need to improve on.
- Ask the student to reflect on the “Who Moved My Cheese” book and their status.
- Write a personal objective that identifies the changes the student wants to make that is measurable and includes timelines and resources to accomplish it. Now have them track their progress towards this goal.
- Make a list of feedback you have received over the last 2-3 weeks. Make a two-column sheet with positive feedback on the left and negative feedback on the right. This should include feedback from your fieldwork supervisor, other therapists, patients, peers, and your family. Now examine the lists. What conclusions can be drawn from this information?
- If the student has difficulty accepting feedback, they may be quick to use defensive mechanisms (denial, regression, rationalization, etc.). Constructive criticism is an effort to help the student identify what needs to change. The speaker is trying to help. Ask the student to listen intently to the speaker and thank the speaker for providing this information. The student should paraphrase the issues presented to them about what others are telling them. Ask the student to check in with others about what others’ opinions are of them. Make every effort to learn from this situation, do not ignore it.
- Keep a feedback log. Have the student track the feedback they receive and review it weekly with the supervisor to see if they are making progress.
- Keep a journal. Use the journal to express feelings, emotions and responses to a variety of situations.

Observation:

When a student is having difficulties with interpreting observations, they are missing valuable information and cues from the client and environment that the more skilled clinician recognizes. This missed information may be vital to making adaptations and changes in the therapeutic process. Most often these difficulties can be improved when the student can learn to watch more carefully and write concisely about what they are observing.

Fieldwork supervisors should ask the student to observe closely and record their observations of a particular treatment or assessment process. This can be done regularly so the student practices and improves. Think about what you, the fieldwork supervisor, notice the student is missing when observing. Therapists often revise their procedures during a task, based on their observation of the process. Students who miss the clues will not make the necessary adjustment. Sometimes the students are so focused on what they should be doing, they forget to attend to the client and the environment. More experienced therapists are more attune to these and are more comfortable with their own roles.

Difficulties in this area can usually be remediated with more opportunities to observe and reflect on their observation skills.

Grading Activities:

When a student has difficulty with grading activities, they may have difficulty adapting the task to make it a just right challenge for the client. Students may make the task too easy and boring or too hard and frustrating for the patient. Either way, the client is not experiencing success with the activity.

First ask the student to identify the rationale behind selecting this particular activity. Have the student consider these:

- Is this activity an appropriate one for this client given the current available information?
- Is the activity culturally appropriate? Age appropriate? Gender appropriate?

- Is the client intrinsically motivated to complete this activity?
- Can the task be adapted easily?

If the student answered the above questions and the activity has met these criteria, then move to the task analysis. Have student list each step of the activity, the assistance, or cues to provide, how to gradually increase or decrease performance demands. The student should consider the task demands and possible changes such as positioning the client, positioning of the materials, size of materials, type of tools needed, type of cues provided, amount of assistance provided, etc. The student can change the environment, the task, or the person. Have the student write this out ahead of the treatment so the thought process is in place.

Sometimes the student can do the task analysis component well but has difficulty with the synthesis. This is the part when the task demands are changed to match the client's abilities. This is the essence of grading a task. If this is the problem, have the student analyze the same task with two very different patients (i.e. a five-year-old with CP and an adult with TBI). This may help illustrate the synthesis component. Discuss the analysis and synthesis components with the student.

Therapeutic Handling:

When a student is having difficulty with therapeutic handling, they may not be effectively using their hands to guide the client's motor control. The student may not be sure of what to do with their hands, where to place the hands, or how to change the response the client is showing to them. This is a skill that requires much guided practice to comprehend and master. Most likely the student has practiced most of these techniques on primarily neurotypical bodies (their classmates and family members). This may be the first time they really feel changes in muscle tone, joint tightness or hypermobility, etc. There are many things the fieldwork supervisor can do to help the student reason through the process and practice it.

- Have the student write up a plan with specifics about what they need to do. If working with a client that has abnormal muscle tone, have the student list muscle groups or specific muscles that have abnormal tone. Next identify the type of abnormal tone and specific handling techniques that can be used when facilitating movement. Lastly identify the most ideal positions to perform therapeutic handling, always keeping client safety at the forefront. Review the plan with the student before the session begins and provide feedback.
- Have the student practice therapeutic handling techniques on another person with a “normal” tone, range of motion, motor coordination, etc. Have the student identify musculoskeletal landmarks and practice placing their hands in an effective manner to facilitate movement. The student can have the “client” move in specific ways, such as reaching in various planes, and identify the changes they feel in specific muscles/parts of the body when the client actively moves.
- Have the student practice some techniques on the fieldwork educator. Provide immediate feedback during the process and identify what the student is doing correctly and incorrectly. Factors to consider are the weight of the hand on you, the amount of pressure, the gliding of their hands to promote movement, and the support provided proximally to help maintain balance when needed. Some describe this process as a dance. The student must provide the right cues to help you gently move.
- Role model specific techniques on a client and ask the student questions during the process. It’s best if you tell the student about this activity ahead of time to ease anxiety. You can ask them to identify where your hand is placed, which techniques you are implementing, which muscles show a change in tone, why you moved your hand to a new location or changed your technique, etc.
- Refer them back to the textbooks to review the motor control theories, hand placement techniques, movement patterns, etc.
- Have the student practice with you a variety of clients with various stages of recovery and different types of abnormal tone. The more the student feels, the more they will understand the normal movement process.

- There are some commercially available videos of therapists demonstrating handling techniques on a client. Have the student watch the video and describe what they see and what they learned. The students also have access to the ICE Video library.

Accepting Feedback:

A student who is not accepting of feedback often has a defense mechanism blocking their ability to actively listen. The student may be denying it is their responsibility to change. The student could be defensive. The student could be withdrawn. The student could appear stubborn and resistive to change. The student may be tired of hearing the same feedback. The student may be down and not sure what else to do. Either way, you are both probably uncomfortable with the situation at the present time.

- Make an appointment to meet with the student daily (if possible), and if not daily, then at least twice weekly. This will eliminate the possibility of avoiding each other and set the stage to make the meetings gradually more comfortable.
- Each of you should prepare a list of experiences or learning opportunities provided to the student that day or week (i.e. evaluations conducted, client treatments, etc.). Now identify your reflection of how the student performed during each experience. Each statement on the list must begin with “I” not “you”. The fieldwork supervisor’s list may have beginning statements such as “I observed ..., I noted. , I saw the client do this., I heard the nurse say”. The student should make their list of experiences and identify their reflection of the process.
- Begin your meeting dialogue by comparing the positives. Discuss the diversity of responses between the student and yourself. Summarize what you both perceive as going well.
- Next, ask the student to identify their perceptions of what did not go well or as planned. Listen carefully. Discuss your perceptions and dialogue about the differences in perception. Be an active listener. Make eye contact. Allow the student time to speak their perceptions. Summarize both of your findings.

- Conclude with the student formulating an action plan that includes what experiences they want and what they will do differently to promote a different outcome.
- Try to identify ways in which the student can learn to critique themselves or be observed by someone else and get feedback. This will provide multiple sources of feedback to the student. Often when a student reviews their own work later the perception is different. Have student watching a videotape of themselves performing a specific procedure and ask him/her to evaluate the performance. Can the student now identify their areas of need?
- Ask the student to start a personal journal where they reflect at the end of each day on the positive and negative experiences. This can be just for the student to read. Encourage the student to vent and write freely and then reflect to see if they identify changes in themselves.

Helpful suggestions for providing feedback:

- Be very specific when giving feedback about each situation.
- Give feedback in a private area not in front of others.
- Be honest.
- Provide suggestions for improvement.
- Provide feedback on a situation as quickly as possible.
- Always make sure the student understands the feedback given.
- Focus your feedback on the behavior.
- Base your feedback on first-hand experience.
- Be mindful of self-esteem.
- Allow the student time to respond.
- Relate feedback to learning goals.
- Be nonjudgmental.
- Avoid assumptions.

If this plan is not helping, contact the Academic Fieldwork Coordinator for further suggestions.

Fieldwork Failure:

Failing a student is a very stressful experience for both the supervisor and the student. Often fieldwork supervisors report they are torn between their commitment to the student and their commitment to the clients. Supervisors want the student to be successful, however, they cannot pass a student who is not showing entry-level competencies. Students must take responsibility to change to meet the requirements for each fieldwork site. Supervisors should immediately act when a student's performance is not up to acceptable levels. Provide feedback regularly, as early as possible during the rotation, and in writing.

Kramer and Stern (1995) suggest that three things be done when a student is having difficulty:

- Supervisors should provide students with specific and direct feedback that can be used in systematic, goal directed way.
- Supervisors should describe why these actions or behaviors interfere with development and are not conducive to meeting performance expectations.
- If problems do not improve after the above two suggestions are implemented, contact the Academic Fieldwork Coordinator.

Mc Creedy & Graham (1997) identify a five-step process for dealing with students with problem behaviors. They suggest the following:

- Identify student problems and discuss with colleagues.
- Initiate the use of weekly feedback logs with the student. Try to resolve the problem. Meet with student and articulate concerns clearly and with examples. Keep notes of your meeting with the student and have both of you sign and date your summary of the meeting. Do not focus on student's personal issues but focus on performance problems. Conclude with developing a plan of action that identifies what the student will do to remediate the area of need.

- Set measurable objectives for student performance.
- Utilize the weekly feedback logs with the student. Both the supervisor and the student should keep copies of these forms.
- Collaborate with school. Call the Academic Fieldwork Coordinator and discuss the situation. The Academic Fieldwork Coordinator may decide to make a site visit to sit down with the fieldwork supervisor and the student to review the action plans and progress to date. You may collectively complete a behavioral contract at this time. Provide copies of weekly feedback forms. Don't wait too long to make this call. The longer you wait, the more likely the student will not be successful within the time designated for completing level II fieldwork.
- Follow up meetings between supervisor and student. Meet regularly, preferably weekly or twice weekly to measure progress towards goals and to provide further feedback to student about performance. Keep accurate notes regarding these meetings. If the student is not making sufficient progress, a meeting between the fieldwork supervisor, the student, and the Academic Fieldwork Coordinator is warranted. Decisions may need to be made about the possibilities of success or failure for the student. Options to consider include extending the fieldwork time if student can make progress or termination of the fieldwork with a failing grade. These decisions will be made collaboratively between the school, the fieldwork site and the student.

Creating the Paper Trail:

It cannot be emphasized enough the importance of accurate and adequate documentation when a clinical rotation site may be failing a student. The weekly feedback forms and behavioral contracts are the written documents providing evidence about the quality of the supervision and feedback provided to the student. It provides evidence that the student was informed early of the need to improve and provides objective measures of the student performance. Sites may want to save examples of the written work the student completed that was unacceptable. Also, you should add any written observations about the student's performance. If you receive feedback from other departments, make a written note that includes the behaviors noted, the date and place they occurred, the person who witnessed

the behaviors, and the outcomes. Be sure to follow up with the student on the weekly feedback logs and behavior contracts when warranted.

Look at your facilities employee handbook and identify policies about consequences of unprofessional behaviors. How would this employer handle similar behaviors in an employee? Use that as a guide. Any inappropriate and unprofessional behaviors that jeopardize a client's safety or confidentiality should be immediately noted and dealt with. You may utilize the AOTA professional Code of Ethics and Standards of Practice as guides for writing up infractions. Any infractions of this nature should be reported immediately to the Academic Fieldwork Coordinator. Students should be asked to sign and date forms written about infractions to avoid the student denying that they received the information.

You are NOT alone in the process. The Academic Fieldwork Coordinator will guide you through the process of providing adequate supervision for the OT student. When things are going well, little intervention is warranted. However, when issues arise and the student does not make changes in performance, the AFWC should be contacted immediately to help you both work through the issues, assure objective measures are being utilized, and provide resources for both of you. This mediation is necessary and should be utilized whenever needed.

Rutgers University School of Health Professions Dismissal Policy

In line with SHP Probation Dismissal and Academic Standing Policy 3.1, academic dismissal can occur due to below satisfactory performance on a fieldwork experience as defined by the program. The need to remediate and/or repeat a clinical experience may result in a delay in graduation. If a student fails a clinical experience, the Academic Fieldwork Coordinator, in consultation with the OTD Program faculty, determines whether the student's performance is outside acceptable ethical, legal, or professional standards. If that determination is made, the faculty decides whether the student is immediately dismissed from the Program.

If it is determined that the student will not be dismissed, or if there were extenuating circumstances that contributed to the failure, the student will begin a remediation process/course

as determined by the Academic Fieldwork Coordinator. Steps to correct the issues may include, but are not limited to, additional coursework, independent study, professional counseling/therapy, and medical treatment.

The occupational therapy doctoral program offers remediation for only one failed fieldwork experience. Remediation is managed individually to address each students' specific needs and areas of deficiency. Once the remediation process is complete, the student will be required to repeat the failed fieldwork course. Scheduling and timing of the repeat clinical experience is dependent on clinical site availability in addition to when the fieldwork course is offered within the program. The Academic Fieldwork Coordinator collaborates with the student to plan another fieldwork experience.

If a student has a medical condition or extenuating life circumstance that interferes with fieldwork, s/he may request for a withdrawal or an early termination of the fieldwork with a grade of Incomplete. The student must provide documentation regarding the situation. For medical conditions, this documentation must include a note from a physician indicating the date the student may resume fieldwork. Withdrawal must occur within the timeline set by the University for such action.

In the case of an approved withdrawal from or an Incomplete in a Level II fieldwork experience, the Academic Fieldwork Coordinator assigns the student to a new fieldwork placement. This new placement may take time to arrange and will likely interfere with progression in the OTD program and postpone graduation. If a student chooses to withdraw from his or her fieldwork placement without the approval of the Academic Fieldwork Coordinator, he or she receives a failing grade for the course.

REFERENCES FOR FIELDWORK EDUCATION

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- American Occupational Therapy Association. (2014). Occupational therapy practice framework: Domain and process (3rd ed.). *American Journal of Occupational Therapy*, 68, S1-S48.doi:10.5014/ajot.2014.682006
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(2nd ed.) Bethesda, MD: AOTA Press.

Sladyk, K. (2002). *The successful occupational therapy fieldwork student*. Thorofare, NJ: SLACK, Inc.



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

FIELDWORK POLICIES AND PROCEDURES MANUAL SIGNATURE PAGE

The undersigned indicates, by their signature that they have received and read the Rutgers Occupational Therapy Doctoral Program Fieldwork Policies and Procedures Manual and is, therefore cognizant of the University, School and Program policies and is responsible for compliance with these policies for the period of enrollment in the Occupational Therapy Doctoral Program.

Print Name: _____

Signature: _____

Date: _____

Please make a copy of this for your records and upload a copy on the Exxat system for the OTD Academic Fieldwork Coordinator by the date given at fieldwork orientation.



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

FIELDWORK SUPPLEMENTAL FORMS AND RESOURCES

Occupational Therapy Doctoral Program School of Health Professions

Rutgers, The State University of New Jersey



Creating innovative leaders who can enable occupational justice through occupation-based therapy in contemporary and future practice areas

Honoring current and emerging evidence-based, collaborative practice by building bridges to the community

Developing a solid foundation for OT practice and scholarship over a changing health care environment

Updated August 2024



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

A LETTER TO OUR FIELDWORK EDUCATORS

Dear Occupational Therapy Fieldwork Educator,

We sincerely thank you for your commitment to fieldwork education. Fieldwork experiences are an integral part of the preparation of our students to become occupational therapists. Our Rutgers' program is new and developing and we have been awed by how many of you have chosen to be our partners in this process. We would not be able to create experienced, educated, and critically thinking occupational therapists without you. Your part in this process is invaluable.

We are aware that in an ever-changing medical world that having students is not always easy; and therefore, dedication of your time, energy, and knowledge to our students means so much to us.

This Occupational Therapy Doctoral Fieldwork Manual provides information about Rutgers' School of Health Professions, our occupational therapy doctoral program including our mission, values and curriculum, our fieldwork policies and procedures, and information vital to our students' success. We have created this document to serve as a guiding tool for both you and our students throughout the fieldwork process.

Thank you again for your support, and we look forward to collaborating with you.

Sincerely,

Dr. Amiya Waldman-Levi, PhD, OTR/L, FAOTA
Rutgers' School of Health Professions, Program Director
Amiya.waldmanlevi@rutgers.edu

Dr. Dana Richmond, OTD, OTR/L, MSCS
Academic Fieldwork Coordinator
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RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK EDUCATOR RESPONSIBILITIES:

To the Fieldwork Educator (FWEd),

We appreciate your efforts in furthering the education of fieldwork students and supporting the advancement of the occupational therapy profession through fieldwork education.

Please make sure to complete the following:

Form	Instructions	Due Date	Submission
Collaboration for Fieldwork Objectives	Review and add any additional learning outcomes that you expect the student to achieve. Sign to indicate agreement	Week 1	Student will upload to Canvas Course
Student Orientation Checklist Form	Review with the student. FWEd and student to sign.	Week 1	Student will upload to Canvas Course
Level II Weekly Supervision Form- <i>Optional</i>	To facilitate communication and provide feedback to the student regarding strengths and areas for growth.	Weekly	If completed, student will upload to Canvas Course
Fieldwork Time Log	Sign off/Approve student's attendance each week	Weekly	Student will complete in Exxat
In-Service Assignment Grading Form	Used to grade the student's in-service assignment and provide additional feedback. FWEd and student to sign.	Week 12	Student will upload to Canvas Course
Level II Fieldwork Experience Guideline Form	Use as a guide to delineate student and FWEd roles and gradual increases in responsibility of the student throughout the experience.	Week 1-12	Sign and student will upload to Canvas Course
AOTA Data Form	Assist student to ensure accurate and thorough completion.	Week 12	Complete in Exxat and/or student will upload to Canvas Course
Student Evaluation of the Fieldwork Experience	Used by student to evaluate the fieldwork experience. FWEd and student to review and sign	Week 12 (BEFORE completion of the AOTA FWPE)	Student will complete in Exxat

Professional Behaviors Form	Use to monitor a student's professional behaviors throughout the fieldwork experience.	Weekly As Needed	Complete and please email to AFWC with concerns
AOTA Fieldwork Performance Evaluation (sent to FWEd via Formstack)	Use to measure entry-level competence of the student throughout the experience.	Week 6 & Week 12	Complete in Formstack



RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK STUDENT RESPONSIBILITIES:

To the student, you are responsible for:

- Demonstrating professional behaviors appropriate for an entry-level occupational therapist and adhering to the policies of the fieldwork site as well as the Rutgers Occupational Therapy Doctorate Program's policies in the student handbooks and Fieldwork Manual.
- Ensuring the following forms are completed and uploaded into the online fieldwork course, either in Canvas or through Exxat.

Please make sure to complete the following:

Form	Instructions	Due Date	Submission
Collaboration for Fieldwork Objectives	Review the learning outcomes for your fieldwork experience.	Week 1	Upload to Canvas Course
Student Orientation Checklist Form	Review with the FWEd. FWEd and student to sign.	Week 1	Upload to Canvas Course
Fieldwork Educator Contact Information	Add/update FWEd information in Exxat	Week 1	Complete in Exxat
Fieldwork Schedule (Days/times)	Complete weekly schedule form for days/times at site, anticipated time off, etc.	Week 1	Upload to Canvas Course
Level II Fieldwork Experience Guideline Form (12-Week Schedule)	Use as a guide to delineate student and FWEd roles and gradual increases in responsibility of the student throughout the experience. Review with the FWEd. FWEd and student to sign.	Week 1	Upload to Canvas Course
Facility Overview Form	Complete this form examining the facility, its clients, and staff.	Week 3	Complete in Exxat (if available) or Upload to Canvas Course
Level II Fieldwork Midterm Student Feedback Form	Complete this form examining the student perspective of the fieldwork experience and FWEd supervision	Week 6	Upload to Canvas Course
AOTA Fieldwork Performance Evaluation--Midterm	Used to measure entry-level competence of the student throughout the experience.	Week 6	Complete via Formstack (form organized in manual under Final)

AOTA Data Form	Complete with input from FWEd.	Week 7	Complete in Exxat (if available) or Upload to Canvas Course
In-Service Assignment Grading Form	Used to grade the student's in-service assignment and provide additional feedback. FWEd and student to sign.	Week 11	Upload to Canvas Course
Student Evaluation of the Fieldwork Experience	Used by student to evaluate the fieldwork experience. FWEd and student to review and sign (COMPLETE BEFORE completion of the AOTA FWPE)	Week 12	Complete in Exxat
Level II Weekly Supervision Form- <i>Optional</i>	To facilitate communication and provide feedback to the student regarding strengths and areas for growth.	Weeks 1-12	If completed, Upload to Canvas Course
Patient Logs	Complete patient logs each week to provide an overview of patient load, diagnoses and OT process at the fieldwork site	Weeks 1-12	Complete in Exxat (if available) or Upload to Canvas Course
Fieldwork Time Log	Keep track of weekly hours completed at fieldwork site.	Weeks 1-12	Complete in Exxat
Professional Behaviors Form	FWEd may use this to monitor a student's professional behaviors and report concerns to AFWC	Weeks 1-12	FWEd will email AFWC with concerns
AOTA Fieldwork Performance Evaluation--Final	Used to measure entry-level competence of the student throughout the experience.	Week 12	Complete in Formstack

Important Note:

- The FWEd may also assign additional projects appropriate for student learning experience at their facility.
- If questions arise concerning assignments, the FWEd and/or student should contact the AFWC.
- Additional projects assigned by the fieldwork site are not required to be sent to the AFWC. However, additional assignments can be uploaded to the Canvas Course.



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: RU SITE SPECIFIC LEARNING OBJECTIVES

Student Name:	
Fieldwork Educator Name:	
Site:	
Date:	

Level II FIELDWORK OBJECTIVES

#	AOTA Level II OTD	Clarifications
I. FUNDAMENTALS OF PRACTICE		
1	Adheres consistently to the AOTA Code of Ethics and site's policies and procedures	Adheres to the AOTA Code of Ethics including (make sure to have a copy) <ul style="list-style-type: none">procedural justice- complies with all facility policies and procedures, local, state and federal regulations, AOTA guidelinesFollows all HIPAA procedures for confidentiality of client and health informationbeneficence- concern for well-being & safety of clientsculturally competent care, client-centered care-non-maleficence- refrains from actions that could cause harmautonomy-of client, respects confidentiality, follow HIPAA proceduressocial justice- fair and equitable in providing services-veracity- is accurate and objective in providing information & documentationfidelity- treats colleagues with respect, shows integrity
2	Adheres consistently to safety regulations and uses sound judgment to ensure safety.	<ul style="list-style-type: none">Follows FW setting's policies and procedures for client safetyDemonstrates awareness of hazardous situations, and reports safety issues to supervisorFollows all client safety measures including those related to wheelchair safety, patient mobility and falls, precautions and infection controlWork area is maintained safely, equipment and supplies are stored as per facility procedureIdentifies and reports safety concerns to supervisor and/or appropriate clinical staffUses tools and equipment safely as instructedHandles client in manner that is safe for the client and for the practitioner (using good body mechanics)Assists in emergency situations as neededFollows infection control procedures
3	Ensures the safety of self and others during all fieldwork related activities by anticipating potentially unsafe situations and taking steps to	<ul style="list-style-type: none">Examples: body mechanics, medical safety, equipment safety, client-specific precautions, contraindications, community safety

	prevent accidents.	
II. BASIC TENETS		
4	Articulates the values, beliefs, and distinct perspective of the occupational therapy profession to clients and other relevant parties clearly, confidently, and accurately	<ul style="list-style-type: none"> • Verbalizes definition of occupational therapy as relevant to Fieldwork setting or audience • Explains the role of OT within this practice setting in a manner appropriate to the recipient (team member, student, client, family, 3rd party payer) Able to articulate an “elevator speech” regarding occupational therapy and role of the OTA as needed
5	Articulates the value of occupation as a method and desired outcome of occupational therapy to clients and other relevant parties clearly, confidently, and accurately	<ul style="list-style-type: none"> • Verbalizes definition of occupational therapy as relevant to Fieldwork setting or audience • Explains the role of OT within this practice setting in a manner appropriate to the recipient (team member, student, client, family, 3rd party payer) • Able to articulate an “elevator speech” regarding occupational therapy and role of the OTA as needed
6	Articulates the role of occupational therapy practitioners to clients and other relevant parties clearly, confidently, and accurately.	<ul style="list-style-type: none"> • Verbalizes definition of occupational therapy as relevant to Fieldwork setting or audience • Explains the role of OT within this practice setting in a manner appropriate to the recipient (team member, student, client, family, 3rd party payer) • Able to articulate an “elevator speech” regarding occupational therapy and role of the OTA as needed
III. SCREENING AND EVALUATION		
7	Articulates a clear and logical rationale for the evaluation process based on client information, contexts, theories, frames of reference, and/or practice models.	<ul style="list-style-type: none"> • Uses evidence-based practice resources (AOTA resources, studies cited in recent textbooks, other reliable sources) when planning and discussing evaluation and assessment
8	Obtains sufficient and necessary information from relevant sources throughout the evaluation process	<ul style="list-style-type: none"> • Reviews chart or record for information that is relevant for occupational therapy • Interviews client and/or family, caregiver, staff, significant other to determine client priorities, goals, occupational and role history, contexts, and functional status • Initiates communication with family/significant others • Examples: record or chart review, client, family, caregivers, service providers
9	Selects relevant screening and assessment tools based on various factors.	<ul style="list-style-type: none"> • Obtains information about client’s skills and limitations through interview, observation and analysis of occupational performance. • Demonstrates service competency in selected assessment methods including assessment of occupational performance in ADL and IADL • Examples: Psychosocial factors, client priorities, needs, and concerns about occupational performance and participation, theoretical support, evidence, practice context, funding sources, cultural relevance
10	Determines the client’s occupational profile and occupational performance through interview and other appropriate evaluation methods.	<ul style="list-style-type: none"> • Occupational profile: Summary of the client’s occupational history and experiences, patterns of daily living, interests, values, and needs. • Occupational performance: 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.
11	Evaluates and analyzes client factors and contexts that support or hinder occupational performance.	<ul style="list-style-type: none"> • Client factors: 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.

		<ul style="list-style-type: none"> Contexts: Variety of interrelated conditions within and surrounding the client that influence performance, including cultural, personal, physical, social, temporal, and virtual contexts. Includes the consideration of all client-centered components including psychosocial factors
12	Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable	<ul style="list-style-type: none"> Uses evidence-based practice resources (AOTA resources, studies cited in recent textbooks, other reliable sources) when planning and discussing intervention Examples: follows assessment protocols, adheres to time guidelines
13	Modifies evaluation procedures based on client factors and contexts	<ul style="list-style-type: none"> Adjusts evaluation as needed in response to changes in clients' status Examples: uses a quiet space, breaks up evaluation into smaller parts, provides multisensory instructions
14	Interprets evaluation results to determine the client's occupational performance strengths and challenges.	<ul style="list-style-type: none"> In collaboration with the client and the OT, establishes goals that are achievable, measurable and specific
15	Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance.	<ul style="list-style-type: none"> Accurately reports functional status and assistance levels to the occupational therapist Summarizes information from chart/history and observation and provides accurate documentation Accurately reports scores from objective assessment tools
IV. Intervention		
16	Articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence.	<ul style="list-style-type: none"> Completes intervention plans for clients in collaboration with the OT Plans session for the next day and provides to supervisor by day/time specified according to site requirements Intervention plan prioritizes problems and focuses on skills needed to progress and achieve goals Prioritizes problem areas and addresses foundation skills needed for intervention progression Plan reflects theory/practice model, language of OTPF III Plan includes reference to evidence that supports intervention Plan includes reference to therapeutic use of self (therapeutic roles-/ instructor, coach, role model, problem solver, and environmental & therapeutic qualities- Rutgers handout/resource)
17	Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models.	<ul style="list-style-type: none"> Implements intervention in a manner that allows clients to succeed and to be appropriately challenged Considers motor, process and social interaction skills of the clients when providing intervention and grading activities Grades activity by changing clients' position, objects, tools, and materials to facilitate success and offer appropriate challenge concurrent to the session Examples: creates relevant and measurable goals in collaboration with the client and/or family/caregivers; recommends additional consultation and referrals
18	Uses evidence from research and relevant resources to make informed intervention decisions.	<ul style="list-style-type: none"> Uses evidence-based practice resources (AOTA resources, studies cited in recent textbooks, other reliable sources) when planning and discussing intervention
19	Selects client-centered and occupation-based interventions that motivate	<ul style="list-style-type: none"> Describes how therapeutic activity will be adapted to promote clients' success Describes how therapeutic activity can be graded to promote success and challenge the client(s)

	and challenge the client to achieve established goals that support targeted outcomes	<ul style="list-style-type: none"> Following a therapy session, describes and documents intervention plan for next session Able to upgrade and downgrade activities in plan and during the session Includes the consideration of all client-centered components including psychosocial factors
20	Implements client-centered and occupation-based intervention plans	<ul style="list-style-type: none"> Intervention reflects clients' occupational profile and goals Grades activity and adapts environment or equipment as needed during intervention Matches therapeutic use of self to needs of the client(s) during OT session Includes the consideration of all client-centered components including psychosocial factors
21	Chooses and, if needed, modifies intervention approach to achieve established goals that support targeted outcomes.	<ul style="list-style-type: none"> Examples: prevention, restoration, maintenance, promotion
22	Modifies task and/or environment to maximize the client's performance.	<ul style="list-style-type: none"> Adjusts intervention as needed in response to changes in clients' status Examples: upgrades/downgrades task; arranges client's workspace for optimal performance
23	Modifies the intervention plan and determines the need for continuation or discontinuation of services based on the client's status.	<ul style="list-style-type: none"> Identifies barriers to the clients' progress and changes intervention plan as appropriate Works with team to identify progress or barriers to progress and makes changes to intervention plan as appropriate
24	Documents the client's response to services in a manner that demonstrates the effectiveness of interventions.	<ul style="list-style-type: none"> Documentation is timely Documentation is accurate, clear and reflects understanding of differences among subjective, objective and assessment related information Documentation uses proper spelling, punctuation, and grammar Uses facility approved abbreviations in documentation Reports unusual and/or critical information in writing
V. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES		
25	Demonstrates through practice or discussion the ability to collaborate with and assign appropriate tasks to the occupational therapy assistant, occupational therapy aide, or others to whom responsibilities might be assigned, while remaining responsible for all aspects of treatment.	<ul style="list-style-type: none"> Collaborates with interdisciplinary team including OTA, assistants, and other professionals Professional behaviors with interdisciplinary team Examples: paraprofessionals, nurses' aides, volunteers
26	Demonstrates through practice or discussion an understanding of costs and funding systems related to occupational therapy services,	<ul style="list-style-type: none"> Examples: billing for OT services, inventory and ordering of supplies for OT services, and options for client procurement of adaptive equipment

	such as federal, state, third party, and private payers.	
27	Demonstrates knowledge about the organization	<ul style="list-style-type: none"> • Demonstrates knowledge of your facility and our Rutgers • Acts in a way in accordance with facility's mission and values • Examples: mission and vision, accreditation status, licensing, specialty certifications
28	Meets productivity standards or volume of work expected of occupational therapy students	<ul style="list-style-type: none"> • Adheres to productivity standards set by the facility • Meets the weekly expectations for volume of patients, documentation, and workload
VI. COMMUNICATION AND PROFESSIONAL BEHAVIORS		
29	Communicates clearly and effectively, both verbally and nonverbally.	<ul style="list-style-type: none"> • 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. • Presents self in a professional manner and uses eye contact, posture, body language appropriate to client, family and context of situation. • Approaches client in a manner that builds rapport • Uses language appropriate to recipient • Modifies communication to needs of client • Demonstrates reflective listening and responding to clients, families, significant others, colleagues, supervisor appropriate to the situation • Responds appropriately to non-verbal cues from other persons • Directs client as needed • Able to communicate with client who is non-verbal and or does not speak English as primary language • Uses appropriate workplace communication • Examples: clients, families, caregivers, colleagues, service providers, administration, the public
30	Produces clear and accurate documentation	<ul style="list-style-type: none"> • Student uses proper grammar and spelling and legibility of work • Student successfully completes written assignments, and documentation skills • Examples: legibility, spelling, punctuation, grammar, adherence to electronic health documentation requirements
31	Collaborates with fieldwork educator(s) to maximize the learning experience.	<ul style="list-style-type: none"> • Student demonstrates apparent level of interest, level of participation while on site, and investment in individuals and treatment outcomes • Examples: initiates communication, asks for feedback about performance, identifies own strengths and challenges
32	Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with fieldwork educator(s) and others.	<ul style="list-style-type: none"> • Consider student's ability to take responsibility for own learning and to demonstrate motivation • Takes initiative with regards to clinic environment, resource procurement, supervision, and client care as appropriate • Is prepared for each day and each intervention session or meeting, seeks out resources as needed • Participate in additional learning opportunities • Defines personal expectations and goals for the affiliation • Identifies areas of limitation/when help and/or supervision is needed
33	Responds constructively to feedback in a timely manner.	<ul style="list-style-type: none"> • Recognizes professional strengths and weaker areas, asks for help when tasks are beyond abilities • Demonstrates ability to give, receive, and respond to feedback • Seeks guidance when necessary • Follows proper channels of communication

		<ul style="list-style-type: none"> • Accepts and acts upon feedback, instruction, concern from supervisor in a timely manner • Incorporates feedback from supervisor into intervention planning and implementation
34	Demonstrates consistent and acceptable work behaviors.	<ul style="list-style-type: none"> • Maintains appropriate personal/professional boundaries • Presents self in a professional manner with regards to dress, overall appearance, communication, language, time use, and in accordance with all facility policies and procedures • Recognizes and handles personal and professional frustrations • Balances personal and professional obligations • Handles responsibilities • Works with others cooperatively, considerately, and effectively • Responsive to social cues
35	Demonstrates effective time management	<ul style="list-style-type: none"> • Consider student's ability to be prompt, arriving and completing assignments on time. • Documentation completed in a timely manner • Intervention sessions comply with time allocation • Uses not-treatment time effectively • Completes all assignments in time frame established with supervisor • Examples: plans, adheres to schedules, completes work in expected timeframe
36	Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.	<ul style="list-style-type: none"> • Demonstrate therapeutic use of self, including one's personality, insights, perceptions, and judgments, as part of the therapeutic process in both individual and group interaction
37	Demonstrates respect for diversity factors of others.	<ul style="list-style-type: none"> • Apply, analyze, and evaluate the role of sociocultural, socioeconomic, and diversity factors, as well as lifestyle choices in contemporary society to meet the needs of persons, groups, and populations • Examples: culture, socioeconomic status, beliefs, identity
Student Signature		
Fieldwork Educator Signature:		



RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: STUDENT ORIENTATION CHECKLIST

Student Name:	
Fieldwork Educator Name:	
Site/Facility:	
Fieldwork Session:	

Date Completed	Placement Orientation
	Type, philosophy, and purpose of treatment.
	Client census (diagnostic categories, age, total #).
	Policies of placement regarding work hours, absences, holidays, safety precautions, reporting accidents or emergencies, and fire procedures.
	Introduction to key personnel and tour of placement.
	Methods of communication with other departments (conference, team meetings, rounds, etc.)
	Location and method for using client charts.
	Emergency Protocols & Procedures

Date Completed	Department Orientation
	Physical layout – location of records, supplies, equipment.
	Department organizational structure, lines of authority.
	Objectives of services provided by OT.
	Method and types of records used.
	Policies and procedures of department
	Orientation to equipment and materials used in treatment.

	Discussion of type of clients and referral system
	Discussion of type of treatment given.
	Discussion of type of evaluation/assessment tools and tests used.

Date Completed	Orientation to Student Expectations
	Review of student learning outcomes
	Review of student learning assignments
	Review of weekly expectations regarding case load, documentation, and assignment due dates
	Review of resources available to student.
	Review of roles and responsibilities of fieldwork educator, student, and Academic Fieldwork Coordinator.
	Review of special events (if applicable): Lectures, In-service training, etc.
	Review contents of student manual.
	Review of student's orientation and routine weekly schedule
	Review of student evaluation proceedings

Date Completed	Additional orientation specific to the fieldwork site:

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK SCHEDULE

Student Name:	
Name of Facility:	
Fieldwork Educator's Name/Credentials:	
Fieldwork Session:	Level II Fieldwork __/2: Semester:

Please provide the tentative schedule that has been established between the fieldwork educator and the student (it is understood that the schedule may be subject to change; notify the Academic Fieldwork Coordinator and Fieldwork Educator of any change from the regular schedule below within 24 hours of the adjustment).

Scheduled Dates:

Day of Week	Start Time	End Time	Notes
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

If you are aware of any scheduled absences list those below (remember to notify the Academic Fieldwork Coordinator and the Fieldwork Educator in the event of an unexpected absence from the established schedule no later than the day of the absence).

Scheduled Absences:

Date/ Time of Absence	Reason (IE holiday, fieldwork educator absent, doctor apt, etc.)

By signing below, I agree that I have coordinated this schedule with the designated fieldwork educator and I have agreed to be at fieldwork on these dates/times. Should I be absent for any reason not listed above I will notify the Academic Fieldwork Coordinator and Fieldwork Educator no later than the day of the absence.

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 1: Orientation

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Student and FWEd review Fieldwork Manual.	Begin contact and exposure to clients	Student orientation of facility, department & fieldwork
Student and FWEd review fieldwork expectations, assignments and projects	Orient self to clinic, physical surroundings and daily routine	Review student learning outcomes and student expectations for this fieldwork
Student observation/participation in the intervention of clients/caseload the student will be assuming	Gain an understanding of the policies of the department and the facility	Model informal information gathering
Student observation of an OT evaluation (if possible) and discussion of observations and interpretations	Gain comfort with new situations	Review findings from student's chart review
Student completes chart review of one client and discusses findings with FWEd.	Gain understanding of OT role on intervention team	Explain the intervention plan of assigned clients the <u>student will be responsible for</u>
Weekly Supervision Meeting with FWEd	Take initiative to learn your FWEd's clients and to help with <u>interventions and/or evaluations</u>	<u>Review any clinical competency checklists the facility might require</u>
Student completion of time logs	<u>Become familiar with facility's documentation/charts</u>	<u>Review facility's documentation</u>
Student completion of patient logs	<u>Observe an OT evaluation procedure with one client (if schedule permits)</u>	<u>Review assessment tools used for evaluations</u>
Student and FWEd review and sign 12-Week Fieldwork Guideline Form	Identify personal goals/expectations to discuss with supervisor	Review any additional projects required
Student and FWEd review and sign Student Orientation Form	Share your learning style with your supervisor	Schedule weekly supervision meeting
Student and FWEd review and sign Weekly Schedule Form (days/hours)	Communicate any problems or questions to FWEd	Set up student orientation with team members to review discipline roles and responsibilities
Student and FWEd review and sign Fieldwork Objectives Form	Consistently demonstrate appropriate judgment in safety and precautions	Set up student observation of an OT evaluation or re- evaluation (where possible)

Student Signature:	
Fieldwork Educator Signature:	



RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 2: Information Gathering

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Complete a chart review of client and discuss findings with fieldwork educator	Begin to focus on planning clients' intervention plan	Discuss caseload the student will be assuming to enhance observation skills and implementation of intervention skills
Draft SOAP or facility note on at least three of fieldwork educator's clients	Build relationships with clients and staff members	Provide resources upon request
Attend team meeting and care team meeting (if applicable)	Become familiar with resources available for students	Role model intervention, scheduling and making changes to the daily schedule
Observe OT evaluation and be prepared to discuss observations/interpretations	Become familiar with facility's assessment tools and documentation for evaluations	Review assessment tools used for evaluations
Weekly Supervision Meeting with FWEd	Communicate any problems or questions to FWEd	Arrange for student to observe an evaluation and review observations/interpretation with student
Student completion of time logs	Consistently demonstrate appropriate judgement in safety precautions	Review priorities of client information with student before team meetings
Student completion of patient logs	Communicate any problems or questions to FWEd	Complete any clinical competency checklists if applicable
		Meet with student for weekly supervision session

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 3: Intervention Planning and Formal Assessment

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume responsibility for approximately 2-3 client intervention sessions per day, or as appropriate for the facility	Take initiative to maximize your learning experiences; ask your supervisor for extra learning experiences	Collaborate with student to establish goals and review intervention plans
Attend team meetings	Be prepared to discuss your client(s) in team meetings	Review priorities of client information with student before team meetings
Draft SOAP notes or facility documentation on client interventions	Learn the facility's documentation procedures	Role model reviewing of goals with the client in the clinic
Observe an evaluation and document findings and write goals	Become familiar with facility's assessment tools and documentation for evaluations	Role model intervention, scheduling and making changes to the daily schedule
Weekly Supervision Meeting with FWEd	Communicate any problems or questions to FWEd	Review priorities of client information with student before team meetings
Student completion of time logs	Consistently demonstrate appropriate judgement in safety precautions	Continue to review evaluation process
Student completion of patient logs	Communicate any problems or questions to FWEd	Complete any clinical competency checklists if applicable
Student completion of Fieldwork Overview Form		Meet with student for weekly supervision session
		Review documentation and co-sign if applicable
		Meet with student for weekly supervision session

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 4: Intervention Implementation

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume responsibility for interventions for clients assigned	Suggest and implement activities that would be suitable for assigned clients in achieving specific OT goals	Provide feedback on intervention methods and techniques
Maintain daily schedule, arrange for schedule changes as needed	Continue to gain competency in assessment and evaluation documentation	Observe evaluation and provide feedback on evaluation and documentation of evaluation
Write SOAP notes or facility documentation on all client interventions sessions	Communicate clients' goals and progress with other therapists	Review student's presentation at care team meetings, and at team meetings and provide feedback as needed
Observe an evaluation and document findings and write goals	Assume responsibility for daily schedule and schedule changes	Review documentation and co-sign
Report on assigned clients in team meeting following collaboration with FWEd	Communicate any problems or questions to FWEd	Meet with student for weekly supervision session
Administer an evaluation and document findings	Consistently demonstrate appropriate judgement in safety precautions	
Develop treatment plan/goals for client evaluated	Communicate any problems or questions to FWEd	
Weekly Supervision Meeting with FWEd		
Student completion of time logs		
Student completion of patient logs		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 5: Taking Responsibility

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume responsibility for interventions for clients assigned	Recognize need for and adjust or modify the client's treatment plan accordingly	Provide feedback on intervention methods and techniques
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Continue to observe evaluations and provide feedback on evaluation and documentation of evaluation
Write SOAP notes or facility documentation on all client interventions sessions	Assume responsibility for daily schedule and schedule changes	Continue to review student's presentation at care team meetings, and at team meetings and provide feedback as needed
Report on assigned clients in team meeting following collaboration with FWEd	Continue to gain competency in assessment and evaluation documentation	Review documentation and co-sign
Continue evaluating clients and establish goals/treatment sessions	Consistently demonstrate appropriate judgement in safety precautions	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Communicate any problems or questions to FWEd	
Student completion of time logs		
Student completion of patient logs		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 6: Midterm

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume responsibility for interventions for clients assigned	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Continue to observe student's client evaluation and review documentation of evaluation
Write SOAP notes or facility documentation on all client interventions sessions	Assume responsibility for daily schedule and schedule changes	Review documentation and co-sign
Report on assigned clients in team meeting following collaboration with FWEd	Continue to evaluate assigned client(s) and complete documentation of evaluation	Complete student's Midterm AOTA Fieldwork Performance Evaluation and review the evaluation with the student
Continue evaluating clients and establish goals/treatment sessions	Reflect on performance up to date and identify areas of growth	Collaboratively develop a plan with student for student to achieve entry-level competence by end of fieldwork
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	Midterm site visit completed by AFWC (in-person or virtual)
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs		
Student completion of FWPE Midterm (Student Self-Assessment)		
Student completion of Midterm Fieldwork Supervision Form		
Student participation in Midterm Fieldwork Meeting (in-person or virtual)		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	

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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 7: Development of Treatment Planning and Intervention Skills

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Review documentation and co-sign
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Continue to increase competency in assessment goal writing and discharge planning
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	Assist student in the completion of the AOTA Data Form
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs		
Student and FWEd completion of the AOTA Data Form		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 8: Development of Treatment Planning and Intervention Skills

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Review documentation and co-sign
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Continue to increase competency in assessment goal writing and discharge planning
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	Discuss date for in-service presentation with student
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs		
Discuss date for in-service presentation with FWEd		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 9: Development of Treatment Planning and Intervention Skills

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Review documentation and co-sign
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Continue to increase competency in assessment goal writing and discharge planning
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs		
Begin gathering information for in-service assignment		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 10: Developing Holistic Treatment Plans

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Review documentation and co-sign
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Continue to increase competency in assessment goal writing and discharge planning
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs	Facilitate termination of patient/student relationship	
Continue to work on in-service assignment		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 11: Developing Holistic Treatment Plans

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Collaborate with student on future intervention goals/progress of their clients
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Review documentation and co-sign
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Continue to increase competency in assessment goal writing and discharge planning
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	Meet with student for weekly supervision session
Weekly Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	Grade student performance on In-service
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs	Facilitate termination of patient/student relationship	
Student performs/completes In-Service Assignment and submits graded assignment to the Canvas Course		

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



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LEVEL II FIELDWORK: FIELDWORK EXPERIENCE GUIDELINES (12-WEEK SCHEDULE)

Week 12: Closure

Assignments	Student Responsibilities	FWEd/Site Responsibilities
Assume full responsibility of designated caseload including interventions, evaluations and discharges	Recognize need for and adjust or modify the client's treatment plan accordingly	Review documentation and co-sign
Maintain daily schedule, arrange for schedule changes as needed	Communicate clients' goals and progress with other therapists	Meet with student for final supervision session
Complete facility documentation on all client's interventions, evaluations and discharges	Assume responsibility for daily schedule and schedule changes	Complete student's Final AOTA Fieldwork Performance Evaluation and review the evaluation with the student
Report on assigned clients in team meeting following collaboration with FWEd	Continue to refine evaluation skills and discharge planning	
Final Supervision Meeting with FWEd	Consistently demonstrate appropriate judgement in safety precautions	
Student completion of time logs	Communicate any problems or questions to FWEd	
Student completion of patient logs	Facilitate termination of patient/student relationship	
Student performs/completes In-Service Assignment and submits graded assignment to the Canvas Course		
Student completes any additional assignments/projects requested by FWEd and/or site		
Student completion of FWPE Final (Student Self-Assessment)		
Student completion of Student Evaluation of the Fieldwork Experience (SEWFE)		

Reviewed by student and FWEd

Student Signature:

Fieldwork Educator Signature:



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FACILITY OVERVIEW FORM

Facility Name:	
Facility Address:	
Facility Phone:	
Contact Person:	
Site Type:	
Setting:	

FACILITY INFORMATION

Facility Information	Example	Comments
Building Information	1 big room, multiple rooms, bathroom set up, wheelchair accessible, etc. What is in the rooms- IE tables, chairs with or without wheels, computers, TVs, couches, etc.	
Materials	What materials did the facility have. IE games, puzzles, balloons, balls, Thera-band, exercise videos, TVs, computers, etc.	
Emergency Exits	Where are they in the building (i.e. 2 exits in front, 2 in back).	
Parking	Describe parking (i.e. street, lot, permit needed, free, cost, easy to find, hard to find, need to be there at X time to find a spot).	

TYPICAL DAY INFORMATION

Start Time:	End Time:	Time Breakdown (i.e. 9:00-9:30 Clients Arrive; 9:30-10 Exercise Group; etc.)

STAFF

Staff Information	Comments
Number of Staff: <i>How many staff are there on a given day?</i>	
Staff Titles: <i>What are their titles (IE director, volunteer, assistant, etc.)?</i>	
Staff Roles: <i>What their different roles?</i>	
Staff Dress Code:	

CLIENT POPULATION

Client Information	Qualifiers	Comments
Average Number of Clients Per Day:		
Age Range Percentages:	Ages 65+	
	Ages 50-64	
	Ages 30-44	
	Ages 18-29	
	Ages 0-17	
Demographics:	White	
	Black or African American	
	American Indian or Alaskan Native	
	Native Hawaiian or other Pacific islander	
	Asian	
	From multiple races	103

	Some other race (please specify)	
Languages Spoken:		
Client's Rationale for Attendance		

EMERGENCY PROCEDURES

Emergency Procedures	What to do if?...
Fire Occurs	
Facility Loses Power	
Client Falls	
Client Passes Out	
Client has Medical Issue (heart attack, stroke, difficulty breathing)	

SUPERVISION

Supervision Procedures	Examples	Comments
Who is considered your supervisor?		
What is their role/ title at the facility?		
How frequently do you meet with the supervisor?		
How accessible is the supervisor to you?	If you have a problem, can you find them? Are they always in meetings, or not in the building?	
How much feedback do you get from your supervisor?	Feedback includes directions, compliments, constructive criticism, client information, tasks given, etc.	
How much feedback do you get from the rest of the staff?	Feedback includes directions, compliments, constructive criticism, client information, tasks given, etc.	

Reviewed by student and FWEd

Student Signature:	
Fieldwork Educator Signature:	



RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: MIDTERM STUDENT EVALUATION FORM

Student Name:			
Fieldwork Educator Name:			
Site:			
Date:			
Questions	Yes	No	Please comment and explain.
Did you receive an adequate orientation			
Have you been made to feel welcome at the site?			
Do you feel that the expectations were clearly defined during the orientation period.			
Do you have a full understanding of all the assignments and what is expected?			
Do you understand the rationale behind the assignments?			
Are you completing the required documentation as requested in a timely manner?			
How many hours are you spending on work-related assignments outside of the scheduled workday?			

Do you feel as though you are receiving adequate supervision and feedback thus far?			
Student Signature:			

LEVEL I OR II FIELDWORK: INTERVENTION PLANNING TEMPLATE

Student Group Names:		
Site/Class:		

FINDINGS:

Pertinent Client Background Information:	
Occupational Profile:	
Progress in Performance thus far (If Applicable):	

Areas of Occupation	Performance Skills	Performance Patterns	Client Factors	Contexts

INTERPRETATIONS:

Analysis of Occupational Performance	Identify Frame of Reference Guiding your clinical reasoning and decision making:	Goals Can be program goals, group goals, or individual goals	Primary OT Tx Approach and rationale Modify, maintain, remediate, etc.

RECOMMENDATIONS:

Type of Service: (direct/indirect)		Duration of Service:	
Session Participants: (individual, grp of ____)		Location of Service:	

PLAN:

Activity/Occupation (Include number of minutes per task/activity)	Materials and Set-Up	Upgrade and Downgrade (must have at least one of each)	References/Evidence

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL I OR II FIELDWORK: FRAME OF REFERENCE/MODELS OF PRACTICE

Student Name:	
Fieldwork Site:	

Please list the MOP/FOR are applicable to your site and why/how the MOP/FOR can be used to guide programing, treatment, etc. Please have at least two references for each FOR/MOP applicable to your site. References should be written in APA format.

Models of Practice Frames of Reference	Description of MOP/FOR and Application to age group and site (how do the constructs align with your future treatment)	Develop a goal that aligns with your MOP/FOR and fieldwork site	References (APA Format)



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LEVEL I OR II FIELDWORK: PSYCHOSOCIAL FACTORS

Student Name:	
Fieldwork Site:	

Describe the psychosocial needs of the participants at your fieldwork site.	
Describe the main occupations for the participants at the community site.	
Describe how the psychosocial needs identified impact the participant(s)' engagement in their occupation(s).	
Describe the internal and external factors that improve and/or hinder participation in occupations at the community site	
Describe how the site currently addresses psychosocial factors	
If you were the OT at this community site, how would you develop a program and/or address the psychosocial factors of each participant?	

AOTA FIELDWORK DATA FORM

Introduction:

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

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

The Fieldwork Data Form was developed through the joint efforts of the Commission on Education (COE) and the Education Special Interest Section (EDSIS) Fieldwork Subsection with input from many dedicated AFWCs and fieldwork educators.

AOTA FIELDWORK DATA FORM

Date:

Name of Facility:

Address: Street:

City:

State:

Zip:

FW I		FW II	
Contact Person:	Credentials:	Contact Person:	Credentials:
Phone:	Email:	Phone:	Email:

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

OT Fieldwork Practice Settings:				
Hospital-based settings	Community-based settings	School-based settings	Age Groups:	Number of Staff:
<input type="checkbox"/> Inpatient Acute	<input type="checkbox"/> Pediatric Community	<input type="checkbox"/> Early Intervention	<input type="checkbox"/> 0–5	OTRs:
<input type="checkbox"/> Inpatient Rehab	<input type="checkbox"/> Behavioral Health Community	<input type="checkbox"/> School	<input type="checkbox"/> 6–12	OTAs/COTAs:
<input type="checkbox"/> SNF/Sub-Acute/Acute Long-Term Care	<input type="checkbox"/> Older Adult Community Living	Other area(s)	<input type="checkbox"/> 13–21	Aides:
<input type="checkbox"/> General Rehab Outpatient	<input type="checkbox"/> Older Adult Day Program	Please specify:	<input type="checkbox"/> 22–64	PT:
<input type="checkbox"/> Outpatient Hands	<input type="checkbox"/> Outpatient/hand private practice		<input type="checkbox"/> 65+	Speech:
<input type="checkbox"/> Pediatric Hospital/Unit	<input type="checkbox"/> Adult Day Program for DD			Resource Teacher:
<input type="checkbox"/> Pediatric Hospital Outpatient	<input type="checkbox"/> Home Health			Counselor/Psychologist:
<input type="checkbox"/> Inpatient Psychiatric	<input type="checkbox"/> Pediatric Outpatient Clinic			Other:

Student Prerequisites (check all that apply) <small>ACOTE Standard C.1.2</small>		Health requirements:	
<input type="checkbox"/> CPR	<input type="checkbox"/> First aid	<input type="checkbox"/> HepB	<input type="checkbox"/> Physical Check up
<input type="checkbox"/> Medicare/Medicaid fraud check	<input type="checkbox"/> Infection control training	<input type="checkbox"/> MMR	<input type="checkbox"/> Varicella
<input type="checkbox"/> Criminal background check	<input type="checkbox"/> HIPAA training	<input type="checkbox"/> Tetanus	<input type="checkbox"/> Influenza
<input type="checkbox"/> Child protection/abuse check	<input type="checkbox"/> Prof. liability ins.	<input type="checkbox"/> Chest x-ray	
<input type="checkbox"/> Adult abuse check	<input type="checkbox"/> Own transportation	<input type="checkbox"/> Drug screening	Please list any other requirements:
<input type="checkbox"/> Fingerprinting	<input type="checkbox"/> Interview	<input type="checkbox"/> TB/Mantoux	

Please list how students should prepare for a FW II placement such as doing readings, learning specific evaluations and interventions used in your setting: <small>ACOTE Standards C.1.2, C.1.11</small>

Student work schedule and outside study expected:	Other	Describe level of structure for student?	Describe level of supervisory support for student?
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):

Occupations: Client-directed occupations that match and support identified participation level goals (check all that apply): <small>ACOTE Standards C.1.8, C.1.11, C.1.12</small>		
Activities of Daily Living (ADL) <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 Rest and Sleep <input type="checkbox"/> Rest <input type="checkbox"/> Sleep preparation <input type="checkbox"/> Sleep participation Play <input type="checkbox"/> Play exploration <input type="checkbox"/> Play participation Activities: Designed and selected to support the development of skills, performance patterns, roles, habits, and routines that enhance occupational engagement <input type="checkbox"/> Practicing an activity <input type="checkbox"/> Simulation of activity <input type="checkbox"/> Role play Examples:	Instrumental Activities of Daily Living (IADL) <input type="checkbox"/> Care of others/pets <input type="checkbox"/> 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 Leisure <input type="checkbox"/> Leisure exploration <input type="checkbox"/> Leisure participation Preparatory Methods and Tasks: Methods, adaptations and techniques that prepare the client for occupational performance <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:	Education <input type="checkbox"/> Formal education participation <input type="checkbox"/> Informal personal education needs or interests' exploration <input type="checkbox"/> Informal personal education participation Work <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 Social Participation <input type="checkbox"/> Community <input type="checkbox"/> Family <input type="checkbox"/> Peer/friend Education: describe Training: describe Advocacy: describe Group Interventions: describe
Method of Intervention Direct Services/Caseload for entry-level OT <input type="checkbox"/> One-to-one: <input type="checkbox"/> Small group(s): <input type="checkbox"/> Large group: Discharge/Outcomes of Clients (% clients) <input type="checkbox"/> Home <input type="checkbox"/> Another medical facility <input type="checkbox"/> Home health	Outcomes of Intervention <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 OT Intervention Approaches <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	Theory/Frames of Reference/Models of Practice <input type="checkbox"/> Acquisitional <input type="checkbox"/> Biomechanical <input type="checkbox"/> Cognitive/Behavioral <input type="checkbox"/> Coping <input type="checkbox"/> Developmental <input type="checkbox"/> Ecology of Human Performance <input type="checkbox"/> Model of Human Occupation (MOHO) <input type="checkbox"/> Occupational Adaptation <input type="checkbox"/> Occupational Performance <input type="checkbox"/> Person-Environment-Occupation (PEO) <input type="checkbox"/> Person-Environment-Occupational Performance (PEOP) <input type="checkbox"/> Psychosocial <input type="checkbox"/> Rehabilitation frames of reference <input type="checkbox"/> Sensory Integration <input type="checkbox"/> Other (please list):
Please list the most common screenings and evaluations used in your setting:		
Identify safety precautions important at your FW site		

<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
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Performance skills, patterns, contexts and client factors addressed in this setting (check all that apply): <small>ACOTE Standard C. 1.12</small>		
Performance Skills: <input type="checkbox"/> Motor skills <input type="checkbox"/> Process skills <input type="checkbox"/> Social interaction skills Performance Patterns: Person: <input type="checkbox"/> Habits <input type="checkbox"/> Routines <input type="checkbox"/> Rituals <input type="checkbox"/> Roles Group or Population: <input type="checkbox"/> Habits <input type="checkbox"/> Routines <input type="checkbox"/> Rituals <input type="checkbox"/> Roles	Client Factors: <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	Context(s): <input type="checkbox"/> Cultural <input type="checkbox"/> Personal <input type="checkbox"/> Temporal <input type="checkbox"/> Virtual Environment: <input type="checkbox"/> Physical <input type="checkbox"/> Social

Most common services priorities (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

Target caseload/productivity for fieldwork students: 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:	Documentation: Frequency/Format (briefly describe) : <input type="checkbox"/> Handwritten documentation: <input type="checkbox"/> Computerized medical records: Time frame requirements to complete documentation:
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Administrative/Management Duties or Responsibilities of the OT/OTA Student: <input type="checkbox"/> Schedule own clients <input type="checkbox"/> Supervision of others (Level I students, aides, OTA, volunteers) <input type="checkbox"/> Budgeting <input type="checkbox"/> Procuring supplies (shopping for cooking groups, client/intervention-related items) <input type="checkbox"/> Participating in supply or environmental maintenance <input type="checkbox"/> Other:	Student Assignments. Students will be expected to successfully complete: <input type="checkbox"/> Research/EBP/Literature review <input type="checkbox"/> In-service <input type="checkbox"/> Case study <input type="checkbox"/> In-service participation/grand rounds <input type="checkbox"/> Fieldwork project (describe): <input type="checkbox"/> Field visits/rotations to other areas of service <input type="checkbox"/> Observation of other units/disciplines <input type="checkbox"/> Other assignments (please list):
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OPTIONAL DATA COLLECTION:

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

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

Agency for External Review: (name)

Year of most recent review:

Summary of outcomes of OT Department review:

Agency for External Review: (name)

Year of most recent review:

Summary of outcomes of OT Department review:

Agency for External Review: (name)

Year of most recent review:

Summary of outcomes of OT Department review:

1. Describe the fieldwork site agency stated mission or purpose (can be attached).
2. OT Curriculum Design Integrated with Fieldwork Site (insert key OT academic curricular themes here) *ACOTE Standards C.1.2, C.1.3, C.1.7, C.1.8, C.1.11, C.1.12*
 - a. How are occupation-based needs evaluated and addressed in your OT program??
 - b. Describe how you seek to include client-centered OT practice. How do clients participate in goal setting and intervention activities?
 - c. Describe how psychosocial factors influence engagement in occupational therapy services.
 - d. Describe how you address clients' community-based needs in your setting.
3. How do you incorporate evidence-based practice into interventions and decision making? Are FW students encouraged to provide evidence for their practice? *ACOTE Standards C.1.3, C.1.11*
4. 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*
5. 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*
6. 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:
7. 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:

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

Status/Tracking Information Sent to Facility:

Date:

ACOTE Standard C.1.6

Which documentation does the fieldwork site need?

☐ Fieldwork Agreement/Contract?

OR

☐ Memorandum of Understanding (MOU)?

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

Title of parent corporation (if different from facility name):

Type of business organization (Corporation, partnership, sole proprietor, etc.):

State of incorporation:

Fieldwork site agreement negotiator:

Phone:

Email:

Address (if different from facility):

Street:

City:

State:

Zip:

Name of student:

Potential start date for fieldwork:

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

Information Status ACOTE Standards C.1.1, C.1.2, C.1.3, C.1.8,

- ☐ New general facility letter sent:
- ☐ Level I Information Packet sent:
- ☐ Level II Information Packet sent:
- ☐ Mail contract with intro letter (sent):
- ☐ Confirmation sent:
- ☐ Model behavioral objectives:
- ☐ Week-by-week outline:
- ☐ Other information:
- ☐ Database entry:
- ☐ Facility information:
- ☐ Student fieldwork information:
- ☐ Make facility folder:
- ☐ Print facility sheet:

Revised 8/11/2025



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL I OR II FIELDWORK: INSERVICE ASSIGNMENT

Student Name (printed):	
Name of Facility:	
Fieldwork Educator	
Date(s) of Presentation:	
Title of Presentation:	

Student In-service Assignment:

During the Level II fieldwork experience, the student is required to present an in-service and/or project for the fieldwork site. The student is required to collaborate with their Fieldwork Educator and/or staff to determine what type of in- service and/or project would best benefit the needs of the site. The in-service must be at least 15 minutes long, be relevant to the profession of occupational therapy and have at least three sources of supporting evidence. If you would like suggestions for Level II fieldwork project assignments, please contact the Academic Fieldwork Coordinator.

Criteria:	Meets or Exceeds Expectations 5 points	Partially Meets Expectations 3 points	Did not Meet Expectations 1 point
Student collaborated with Fieldwork Educator and/or staff to determine needs assessment			
Assignment was relevant and evidence-based			
Assignment was well thought out, planned and implemented			
Student presented the information in an organized and clear manner			
Student delivered presentation in a professional manner (eye contact, elocution, vocabulary, enthusiasm)			
Student was able to answer audience questions and was knowledgeable on in-service topic			
Assignment included at least 3 sources of scholarly literature as supporting evidence			
Comments: 			
Fieldwork Educator Signature:		Date:	

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 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 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: _____

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

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

Study the following evaluations:

Study the following intervention methods:

Read up on the following in advance:

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

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

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

Why or why not? _____

**Level II Fieldwork
Student Evaluation of the Fieldwork Educator**

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					125

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: _____



RUTGERS HEALTH

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RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: WEEKLY SUPERVISION FORM

Student Name (printed):	
Name of Facility:	
Fieldwork Educator (printed):	
Dates of Session:	

Fieldwork educators are encouraged to provide weekly feedback to students on their progress. This form is intended to help facilitate the conversation, however, using this form is optional if another method is preferred.

To complete the form:

- Fill in the appropriate **weekly letter key** of the student's performance during weeks 1-5, and weeks 7-11, and provide additional details for each week on the back as needed. Add additional site or student specific performance areas in the rows below if appropriate.
- The *AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student* will be used to complete the student's midterm and final ratings.
- If the form is used at any time during the fieldwork experience, the fieldwork educator and student should sign the form and return to the AFWC with the *AOTA Fieldwork Performance Evaluation for the Occupational Therapy Student*.

KEY: E= Exceeds standards | S= Meets Standard | I= Needs Improvement | U= Unsatisfactory

	Week	1	2	3	4	5	Mid term	7	8	9	10	11	Final
Date of Review													
Example: Dress meets department guidelines	I	S	S	S	S			E	E	E	E	E	
Demonstrates appropriate professional behavior													
Demonstrates effective interpersonal skills													
Demonstrates cultural sensitivity													
Provides client-centered OT services													
Demonstrates effective clinical reasoning for OT practice													
Adheres to regulations using judgment and safety													
Utilizes evidence to support OT services													
Exhibits appropriate inter-professional collaboration													
Demonstrates appropriate written communication													
Takes initiative for learning and development													
Responds appropriately to constructive feedback													
Demonstrates sound ethical behavior and adherence to facility policies													

Level II Student Weekly Supervision Form, PAGE 2

Student Performance Areas:	Comments:
Areas of Strength:	
Areas of Need:	
Plan:	
Additional Comments:	

Reviewed by Student and FWEd:

Student Signature:	
Fieldwork Educator Signature:	



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RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL I OR II FIELDWORK: PATIENT LOG

Student Name:							
Date							
Client Initials or Number							
Diagnosis							
Precautions							
Type of Service Provided	OT Process (Check all that apply)		Type of Service (Check all that apply)		Documentation (Check all that apply)		
	Evaluation		Direct: Individual		Session/Treatment Note		
	Intervention		Direct: Group		Evaluation Write-up		
	Discharge Planning		Indirect: Consultation		Progress Report		
			Indirect: Meeting		Billing		
					Discharge planning		
Recommendations	Continue with plan of care			Upgrade Goals and Obj			
	Re-assess/re-evaluate			Downgrade Goals and Obj.			
	Discontinue care			Family Training			
	Consultation/collaboration with care coordination team (teacher, dr., nurse, PT, SLP, etc.)			Patient/Client Training			
Additional Comments and Reflection:							



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RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL I OR II FIELDWORK: SOAP NOTE

Patient Name:		Services Delivered:	
Date of Service:		Service Location:	
Primary Dx:		Secondary Dx:	
Start Time:		End Time:	
S:			
O:			
A:			
P:			
Student Signature:			
Supervisor Signature:			



RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL I OR II FIELDWORK: PROFESSIONAL BEHAVIORS

Professional behaviors are core features of any graduate program that seeks to educate practitioners in a health care discipline. In the Occupational Therapy Doctoral curriculum with Rehabilitation and Movement Science, the following standards have been adopted as expectations for successful completion of the program. Standards for professional behaviors and conduct address fundamental skills inherent in ethical and competent practice. In addition to these standards, students must abide by all applicable University policies (e.g., Policy on Prohibited Discrimination, Harassment and Related Misconduct) and must comply with the American Occupational Therapy Association Code of Ethics.

Process for During mid-term of the first semester of the first year and the start of spring semester of the second year, each student will evaluate his/her status relative to the standards on the Professional Behavior Plan, and work with the academic advisor to receive feedback, set goals and develop an action plan. Feedback will represent input from faculty, instructors, fieldwork coordinator, and fieldwork supervisors. Based on this feedback, each student will revise goals/plans in conjunction with his/her advisor. More frequent meetings may occur at the advisor's or student's request, or if deemed warranted because of other concerns that arise during the student's time in the program. Each student will also meet with their advisor in the final semester in the program and evaluate his/her growth relative to the goals set in the prior semesters.

Student Name:	
Date:	
FWEd Name:	
Site:	
Form Completed by:	
Fieldwork:	Fieldwork ____/2 Semester:

Rating Scale for Performance:	Examples
4: Meets standards to a high degree:	Performance is consistent, skilled, and self-initiated
3: Meets standards:	Performance is frequent and skilled
2: Needs improvement:	Performance needs further development and/or requires assistance and direction
1: Unsatisfactory:	Performance requires substantial development and or requires much assistance and direction

PROFESSIONAL SKILLS	RATING	COMMENTS/PLANS
<i>Commitment to Learning/Excellence</i>		
Analyses, synthesizes, interprets information		
Takes initiative to direct own learning/competence		
Comes prepared for class, lab, and clinic sessions		
Exercises good judgment and problem solving		
<i>Personal Responsibility</i>		
Is dependable and reliable		
Is easily accessible by peers, professors, and clinical supervisors		
Answers emails and phone messages in a professional manner and within a 24-hour period (or within a response time indicated by professors/supervisors)		
Follows through on commitments and assigned tasks		
Maintains cleanliness and organization of classroom, lab, and clinic space		
<i>Social Responsibility</i>		
Cooperates with others/instructs effectively		
Considers the needs of others		
Contributes "fair share" to group efforts		
Meets interpersonal commitments		
<i>Supervisory Relationships</i>		
Receives feedback in a professional manner without becoming defensive		
Uses feedback to alter behavior accordingly		
Takes responsibility for personal behaviors		
Seeks guidance when needed		
<i>Communication Competence</i>		
Demonstrates positive interpersonal skills such as flexibility, empathy, confidence		
Communicates clearly and effectively/assertively		
Communicates equally in group situations and neither monopolizes nor holds back from discussion		
Expresses disagreement in a tactful manner		
Demonstrates respect for the rights of others to hold different values and beliefs		
Contributes to class discussions		
Refers to syllabi, policies, manuals and other documents before inquiring about included material.		
Makes timely and appropriate contact with fieldwork sites in advance of and during FW and returns required documentation to FW Coordinator.		
Informs key faculty (advisor, FW Coordinator) of issues affecting performance, as possible.		

Professional Presentation:	RATING	COMMENTS/PLANS
Adheres to dress code and wears neat, clean clothing appropriate to setting		
Presents self in a manner that is accepted by peers, clients, and supervisors		
Uses body posture and facial expressions that communicate interest or engaged attention		
Displays a positive attitude towards becoming a professional		
Honesty and Integrity:		
Adheres to the Code of Ethics		
Adheres to the Honor Code		
Takes responsibility for and corrects personal errors		
Maintains privacy and confidentiality		

Factually represents situations in an accurate manner		
Respects and returns borrowed materials		
<i>Time/Stress Management</i>		
Informs instructor of lateness or absence prior to class		
Acts proactively, plans, proposes solutions		
Demonstrates flexibility in response to changing demands		
Prioritizes tasks and commitments		
Assignments turned in on time		
<i>Safety</i>		
Anticipates unsafe situations and modifies behavior accordingly		
Recognizes and acts on need for assistance		
Operates within the scope of personal skills		

Reviewed by Student and FWEd:

Student Signature:	
Fieldwork Educator Signature:	



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: OTD STUDENT SKILLS CHECKLIST

This checklist is meant to serve to demonstrate competency in occupational therapy related skills by documenting observation, practice, and clinical use of each skill. Students are required to complete all areas of this form prior to the end of all fieldwork experiences. This form is used to determine students' competencies and abilities in completing occupational therapy skills needed for entry-level clinicians.

To mark the skill completed in any of the sections, it will need to be signed off by a professor, clinical instructor, or academic fieldwork coordinator. All skills will be observed and practiced through the Rutgers' OTD curriculum. Level I fieldwork assignments are set up to ensure students complete all competencies within a clinical setting; however, this is not guaranteed at every setting. Therefore, students who are unable to complete skills at their Level I fieldwork settings will be asked to complete these forms during their first Level II fieldwork assignment. Students may also be given extra opportunities through the curriculum and program to complete competencies when possible.

Competency	Observed/ Taught	Practiced
PROFESSIONALISM		
Punctual	Intentional OTDR 5445	Level IA FW
Meets all deadlines	Intentional OTDR 5445	Level IA FW
Professionally Dressed	Intentional OTDR 5445	Level IA FW
Prepared (paper & pen, other supplies suggested)	Intentional OTDR 5445	Level IA FW
Communicates using a courteous and professional tone	Intentional OTDR 5445	Level IA FW
Responds to all correspondences (emails, requests for forms, clinical requirements) as indicated and in timely manner	Intentional OTDR 5445	Level IA FW
Demonstrates sensitivity and responsiveness to a diverse patient population, including but not limited to, diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.	Intentional OTDR 5445	Level IA FW
Demonstrates an understanding of personal bias and exhibits cultural humility with others	Intentional OTDR 5445	Level IA FW
Actively listens to others and presents their point of view acknowledging differences appropriately.	Intentional OTDR 5445	Level IA FW
Communicates equally in group situations and neither monopolizes nor holds back from discussion	Intentional OTDR 5445	Level IA FW
Demonstrates positive interpersonal skills such as flexibility, empathy, Confidence	Intentional OTDR 5445	Level IA FW
Defines occupation/occupational therapy	Intentional OTDR 5445	Level IA FW
Understands and articulates personal and environmental, occupational justice (includes culture, DEI)	Intentional OTDR 5445	Level IA FW

PSYCHOSOCIAL SKILLS		
Demonstrate intentional therapy in which verbal and nonverbal communication is continuously and consciously analyzed and managed to achieve optimal, empathic, client-centered care	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Demonstrate a repertoire of interpersonal skills needed to build client rapport	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Demonstrate therapeutic listening to be fully present with clients and understand their needs and goals for therapy	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Maintain respectful therapist-client boundaries in accordance with clients' personal and cultural values and the profession's ethics/values	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Create safe therapeutic spaces by establishing confidential (HIPAA compliant) and protective environments in which clients can divulge sensitivities and vulnerabilities	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Demonstrate motivational, strategic, and intentional interviewing skills	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Demonstrate the ability to understand and address the psychosocial dynamics of families and groups	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Demonstrate the 6 skills of intentional relationships: advocacy, empathy, encouragement, instruction, collaboration, problem solving	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
Identify and manage difficult client behaviors, emotions, empathic breaks, and conflict	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis Intentional OTDR 5445 Community Adult Phys Dis
Demonstrate interpersonal skills that reflect cultural competence and an appreciation for diversity	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis	Intentional OTDR 5445 Level I/II FW Mental Health Community Adult Phys Dis
INTERVIEW SKILLS		

Evaluation Completion	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
Eye Contact, Clear Voice	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
Appropriate Determination of What to Ask	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
Therapeutic Use of Self	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
Uses body posture and facial expressions that communicate a positive attitude, interest, and engaged attention	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
Appropriate Determination of What to Ask	Intentional OTDR 5445	Level IA FW Adult Phys Dis Older Adults
COMMUNITY SKILLS		
Needs Assessment: evidence of inclusion of breadth of stakeholders involved, literature, data	Community OTDR 7429	Directed I-III Capstone
Program Design: Design addresses needs identified in needs assessment, is feasible, and involves stakeholders using SMART goals	Community OTDR 7429	Capstone
Program Implementation: evidence of use of a strategic planning model (e.g. logic model, program theory matrix)	Community OTDR 7429 Theory	Capstone
Program Evaluation: evidence of a plan or execution of a plan for evaluating the program outcomes through data collection or use of collected data	Community OTDR 7429 Health Policy	Capstone
THEORY/CLINICAL REASONING		
Evidence of theory/clinical reasoning in all intervention aspects	Foundations OTDR 5225	Foundations OTDR 5225 Adolescent
DOCUMENTATION		
Evidence of clinical reasoning within documentation.	Level IA FW Occupations Adult Phys Peds	Level IA FW Adult Phys Older Adults Peds Community
Evaluation	Level IA FW Occupations Adult Phys Peds	Level IA FW Adult Phys Dis Older Adults Peds Community
SOAP Note (treatment note)	Level IA FW Occupations Adult Phys Peds	Level IA FW Adult Phys Dis Older Adults Peds Community
Progress Note	Level IA FW Occupations Adult Phys Peds	Level IA FW Older Adults Peds Community
Discharge Note	Level IA FW Occupations Adult Phys Peds	Level IA FW Older Adults Peds Community

VITAL SIGNS /BP & PULSE		
Demonstration of BP, Pulse & Respiratory Rate testing	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults
Verbalization of alternate measure placements	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults
Pulse Ox reading	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults
Verbalization of HR/Pulse parameters	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults
Indications for taking vital signs	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults
CPR Training Completed	Adult Phys Dis OTDR 5429	Level IA FW
Response to Vital Sign Concerns	Adult Phys Dis OTDR 5429	Adult Phys Dis OTDR 5429 Level IA Older Adults

Competency	Observed	Practiced
ROM/ GONIOMETRY		
Demonstration of using goniometer at selected joints	Kinesio UE	Kinesio UE
Demonstration of checking functional ROM (recognizing pain limitations)	Kinesio UE	Kinesio UE
Demonstrate assessment of end feel/joint integrity	Kinesio UE	Kinesio UE
Verbalization of contraindications for ROM testing	Kinesio UE	Kinesio UE
STRENGTHENING		
Creative strengthening tools, T-band, weights, pedal bike, wheelchair pushups	Kinesio UE	Kinesio UE
Strengthening Positions: Bed, sitting, standing progression	Kinesio UE	Kinesio UE
Functional Strength: how can strength be functional?	Kinesio UE	Kinesio UE
COORDINATION		
Gross motor function/ coordination tests	Adult Phys Dis Older Adults Peds	Adult Phys Dis Older Adults Peds
Fine motor tests: functional dressing, buttoning, managing zipper	Adult Phys Dis Older Adults Peds	Adult Phys Dis Older Adults Peds
SENSATION/PROPRIOCEPTION		
Verbalization of examples of sensation tests (Hot/Cold, Two point, Sharp/Dull, Light Touch/ Pressure)	Adult Phys Dis Kinesio	Adult Phys Dis

Recognize deficits in sensation and provide treatment strategies	Adult Phys Dis Older Adults	Adult Phys Dis Older Adults
PAIN		
Faces Scale	Peds	Peds
Verbal/ Visual analog scale	Older Adults Peds	Older Adults Neuro Peds
Pain management techniques	Neuro Older Adults Peds	Older Adults Neuro Peds
Identify ineffective and inappropriate pain management	Neuro Older Adults Peds	Older Adults Neuro Peds
Include modalities (fluidotherapy, e-stim, ultrasound, diathermy)		

Competency	Observed	Practiced
MUSCLE TONE/REFLEX		
Verbalization of muscle tone (i.e., increased, decreased, flaccid, paresis, paralysis, paresthesia, hyperesthesia, kinesthesia)	Neuro UE	UE Neuro
EDEMA		
Demonstration of pitting test	UE	UE
Edema measurement sites	UE	UE
Examples of edema reduction techniques	UE	UE
Identify indications for lymphedema management	UE	UE
ASSESSMENTS		
<i>Students will all be able to administer the following assessments. While students will be exposed to a far greater range of assessments, they will have working knowledge of the assessments listed below.</i>		
Canadian Occupational Performance Measure (COPM)	Assessments	Assessments
Adolescent & Adult Sensory Profile (SP)	Assessments	Assessments
Executive Function Performance Test (EFPT)	Assessments	Assessments
Mini-Mental State Exam (MMSE)	Assessment	Assessment
30-Second Chair Stand Test	Assessments	Assessments
Disabilities of the Arm, Shoulder and Hand (DASH)	Assessments	Assessments
Motor Free Visual Perception Test	Assessments	Assessments
CMS Quality Indicators, Section GG	Assessments	Assessments
Modified Barthel Index	Assessments	Assessments
Activity Card Sort (ACS) & Visual Activity Sort	Assessments	Assessments
WHODAS 2.0	Assessments	Assessments
Beery-Buktenica Developmental Test Of Visual-Motor Integration, 6th Edition (Beery VMI)	Peds	Peds
Sensory Processing Measure (SPM)	Peds	Peds
Peabody Developmental Motor Scale (PDMS-2)	Peds	Peds
Sleep assessments (Occupational Profile of Sleep, DBAS-16, FOSQ-10)	Older Adults	Older Adults
Medication Management (MedManage)	Older Adults	Older Adults
ACLS	Older Adults	Older Adults
9-hole peg	Older Adults	Older Adults

Competency	Observed	Practiced
BODY MECHANICS		
Use of transfer/gait belt	Kinesio Adult Phys	Kinesio Adult Phys
Body mechanics for bending, lifting, reaching and computer ergonomics	Kinesio Adult Phys	Kinesio Adult Phys
AMBULATION DEVICES		
Cane Hemi-Cane Quad-Cane Crutches Walker Rollators	Kinesio Adult Phys Dis Older Adults	Adult Phys Dis Kinesio Older Adults
BEDS		
Appropriate height of bed, location	Adult Phys Dis	Adult Phys Dis
Verbalizes proper position of patient sitting at edge and promoting safe transition thru height and location of bed	Adult Phys Dis	Adult Phys Dis
Modifications: discuss rails vs. trapeze vs. hospital bed (electrical vs. manual)	Adult Phys Dis	Adult Phys Dis
WHEELCHAIR		
Use of all components (e.g., rests, brakes, propulsion, etc.)	Kinesio	Adult Phys Dis Kinesio
Indications for power vs. manual	Adult Phys Dis	Adult Phys Dis
Proper fitting (leg rests, arm rests, seat depth, seat width, height, cushion)	Adult Phys Dis	Adult Phys Dis
Postural Alignment	Adult Phys Dis	Adult Phys Dis
FUNCTIONAL MOBILITY		
Bed Mobility	Adult Phys Dis	Level IA
Transfers	Kinesio Adult Phys Dis	Level IA FW Kinesio Adult Phys Dis
Ambulation	Kinesio Adult Phys Dis	Level IA Kinesio Adult Phys Dis
Wheelchair Mobility	Kinesio Adult Phys Dis	Level IA Kinesio Adult Phys Dis

Competency	Observed	Practiced
HOYER LIFT		
Verbalizes safe use of Hoyer, sling sizes, adjustment/fixation to Hoyer, and instruction to caregiver	Adult Phys Dis	Adult Phys Dis
Indications (trunk control)	Adult Phys Dis	Adult Phys Dis
BALANCE		
Verbalization of balance assessment during functional activities	Adult Phys Kinesio	Level IA FW

	Older Adults	
Ability to grade balance activities (Good, Fair, Poor)	Adult Phys Kinesio Older Adults	Level IA FW
ENDURANCE		
Borg/RPE (rate of perceived exertion scale)	Assessments	Assessments
Recognize signs and symptoms of endurance limitations	Older Adults	Older Adults
OXYGEN MANAGEMENT		
Change tank	Older Adults	Older Adults
Adjust liter flow	Older Adults	Older Adults
Flow rate reading	Older Adults	Older Adults
Nasal cannula application	Older Adults	Older Adults
Safety instruction	Older Adults	Older Adults
Pulse ox	Older Adults	Older Adults
MENTAL/COGNITIVE STATUS		
Can identify a client's alertness and orientation x3 status	Adult Phys Dis Older Adults Mental Health	Older Adults Adult Phys Dis Mental Health
Patient's current level of alertness, orientation, comprehension, concentration, and immediate memory for simple commands.	Adult Phys Dis Older Adults Mental Health	Older Adults Adult Phys Dis Mental Health
Suggest interventions (money management, memory log)	Adult Phys Dis Older Adults Mental Health	Older Adults Adult Phys Dis Mental Health

Competency	Observed	Practiced
PRECAUTIONS		
Allergies	CPR	Level IA
Medication reaction	CPR	Level IA
Bleeding precautions	CPR	Level IA
Fall precautions	Older Adults	Older Adults
Isolation precautions	Adult Phys Dis	Level IA
OCCUPATIONS		
Assess and teach ADL's of toileting, dressing, grooming, feeding, and bathing for commonly seen conditions	Adult Phys Dis Older Adults Mental Health	Level IA Mental Health Older Adults
Assess and teach IADL's of advanced meal prep, housekeeping, laundry	Mental Health Older Adults	Mental Health Older Adults
Assess and train in a variety of skills in health management, rest and sleep, education skills, work skills, play/leisure & social participation	Older Adults Mental Health	Older Adults Mental Health
ADAPTIVE EQUIPMENT		
Dressing DME	Adult Phys Dis Older Adults	Level IA FW

(long handled reacher, dressing stick, sock aide, shoehorn)		
Toileting DME (long handled toilet paper holder, commode, raised toilet seat, drop arm commode, grab bars)	Adult Phys Dis Older Adults	Level IA FW
Bathing DME (shower chair, tub bench, grab bars, long handled sponge)	Adult Phys Dis Older Adults	Level IA FW
Feeding DME (adaptive hand tools, weighted utensils, adapted cups knives, etc.)	Adult Phys Dis Older Adults	Level IA FW
Driving DME (seat belt extenders, cushions, handy bar)	Older Adults	Older Adults
SPLINTING		
Resting Hand Splint	UE	UE
Wrist cock up	UE	UE
Thumb spica	UE	UE
Dynamic splint	UE	UE
PHYSICAL AGENT MODALITIES	UE	UE
ERGONOMICS AND TELEHEALTH	Assistive Technology	
EADLS	Assistive Technology	Assistive Technology
ORTHOTICS & PROSTHETICS	Assistive Technology	Assistive Technology

AOTA FIELDWORK PERFORMANCE EVALUATION (FWPE)
LEVEL II FIELDWORK: FIELDWORK PERFORMANCE EVALUATION
MIDTERM AND FINAL

The following information has been adapted from the American Occupational Therapy Association. The Midterm and Final versions of this form will be completed via Formstack.

Rutgers University is using this adapted copy as an informational resource for occupational therapy students in the Fieldwork Manual.

PURPOSE

The primary purpose of the Fieldwork Performance Evaluation for the Occupational Therapy Student is to measure entry-level competence of the occupational therapy student. The evaluation is designed to differentiate the competent student from the incompetent student and is not designed to differentiate levels above entry level competence. The evaluation is designed to measure the performance of the occupational therapy process and was not designed to measure the specific occupational therapy tasks in isolation. This evaluation reflects the 2018 Accreditation Council for Occupational Therapy Education Standards and the National Board for Certification in Occupational Therapy, Inc. Practice Analysis results. In addition, this evaluation allows students to evaluate their own strengths and challenges in relation to their performance as an occupational therapy practitioner.

USE OF THE FIELDWORK PERFORMANCE EVALUATION FOR THE OCCUPATIONAL THERAPY STUDENT

The Fieldwork Performance Evaluation is intended to provide the student with an accurate assessment of his/her competence for entry-level practice. Both the student and fieldwork educator should recognize that growth occurs over time.

The midterm and final evaluation scores will reflect development of student competency and growth.

To effectively use this evaluation to assess student competence, site specific objectives need to be developed. Use this evaluation as a framework to assist in ensuring that all key performance areas are reflected in the site-specific objectives.

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

The Fieldwork Educator must contact the Academic Fieldwork Coordinator when:

- 1) a student exhibits unsatisfactory behavior in a substantial number of tasks
- 2) a student's potential for achieving entry-level competence by the end of the affiliation is in question.

MID-TERM EVALUATION DOES NOT HAVE PASS/FAIL STATUS

DIRECTIONS FOR RATING STUDENT PERFORMANCE ON FINAL EVALUATION

- All items must be scored to receive for 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:
 - Adheres to the American Occupational Therapy Association's Code of Ethics and all federal, state, and facility regulations),
 - Adheres to safety regulations and reports/documents incidents appropriately), and
 - 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

OVERALL SCORE FOR FINAL EVALUATION

Pass. 111 points and above
No Pass. 110 points and below

RATING SCALE FOR STUDENT PERFORMANCE

4 — Exemplary performance:

Demonstrates satisfactory competence in specific skills consistently; demonstrates substantial breadth and depth in understanding and/or skillful application of fundamental knowledge and skills.

3 — Proficient Performance:

Demonstrates satisfactory competence in specific skills; demonstrates adequate understanding and/or application of fundamental knowledge and skills.

2 — Emerging Performance:

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).

1 — Unsatisfactory Performance:

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).

PERSONAL INFORMATION

ARE YOU THE STUDENT OR FIELDWORK EDUCATOR?

COLLEGE OR UNIVERSITY

STUDENT NAME

STUDENT EMAIL

FIELDWORK EDUCATOR NAME

FIELDWORK EDUCATOR CREDENTIALS

FIELDWORK EDUCATOR'S EMAIL

TOTAL NUMBER OF WEEKS

ARE THERE ADDITIONAL FIELDWORK EDUCATOR(S) WORKING WITH THIS STUDENT?

FIELDWORK SETTING

TODAY'S DATE:

TYPE OF FIELDWORK:

NAME OF ORGANIZATION/FACILITY

CITY

STATE

ORDER OF PLACEMENT

OUT OF

FROM

TO

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

12	Administers standardized and non-standardized assessments and surveys accurately and efficiently to ensure findings are valid and reliable. Examples: follows assessment protocols, adheres to time guidelines				
13	Modifies evaluation procedures based on client factors and contexts. Examples: uses a quiet space, breaks up evaluation into smaller parts, provides multisensory instructions				
14	Interprets evaluation results to determine the client's occupational performance strengths and challenges.				
15	Synthesizes and documents the results of the evaluation process clearly, accurately, and concisely, using systematic methods to record the client's occupational performance.				
Comments:					
Intervention					
16	Articulates a clear and logical rationale for the intervention process based on the evaluation results, contexts, theories, frames of reference, practice models, and evidence.				
17	Establishes an accurate and appropriate client-centered plan based on the evaluation results, contexts, theories, frames of reference, and/or practice models. Examples: creates relevant and measurable goals in collaboration with the client and/or family/caregivers; recommends additional consultation and referrals				
18	Uses evidence from research and relevant resources to make informed intervention decisions.				
19	Selects client-centered and occupation-based interventions that motivate and challenge the client to achieve established goals that support targeted outcomes. Includes the consideration of all clients centered components including psychosocial factors				
20	Implements client-centered and occupation-based intervention plans Includes the consideration of all clients centered components including psychosocial factors				
21	Chooses and, if needed, modifies intervention approach to achieve established goals that support targeted outcomes. Examples: prevention, restoration, maintenance, promotion				
22	Modifies task and/or environment to maximize the client's performance. Examples: upgrades/downgrades task; arranges client's workspace for optimal performance				
23	Modifies the intervention plan and determines the need for continuation or discontinuation of services based on the client's status.				
24	Documents the client's response to services in a manner that demonstrates the effectiveness of interventions.				
Comments:					
Management of Occupational Therapy Services					
25	Demonstrates through practice or discussion the ability to collaborate with and assign appropriate tasks to the occupational therapy assistant, occupational therapy aide, or others to whom responsibilities might be assigned, while remaining responsible for all aspects of treatment. Examples: paraprofessionals, nurses' aides, volunteers				
26	Demonstrates through practice or discussion an understanding of costs and funding systems related to occupational therapy services, such as federal, state, third party, and private payers. Examples: billing for OT services, inventory and ordering of supplies for OT services, and options for client procurement of adaptive equipment				
27	Demonstrates knowledge about the organization. Examples: mission and vision, accreditation status, licensing, specialty certifications				
28	Meets productivity standards or volume of work expected of occupational therapy students.				
Comments:					

Communication and Professional Behaviors					
29	Communicates clearly and effectively, both verbally and nonverbally. Examples: clients, families, caregivers, colleagues, service providers, administration, the public				
30	Produces clear and accurate documentation. Examples: legibility, spelling, punctuation, grammar, adherence to electronic health documentation requirements				
31	Collaborates with fieldwork educator(s) to maximize the learning experience. Examples: initiates communication, asks for feedback about performance, identifies own strengths and challenges				
32	Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with fieldwork educator(s) and others.				
33	Responds constructively to feedback in a timely manner.				
34	Demonstrates consistent and acceptable work behaviors. Examples: punctuality, initiative, preparedness, flexibility, dependability, professional appearance				
35	Demonstrates effective time management. Examples: plans, adheres to schedules, completes work in expected timeframe				
36	Manages relationships effectively through therapeutic use of self and adjusts approach to meet the needs of clients and others.				
37	Demonstrates respect for diversity factors of others. Examples: culture, socioeconomic status, beliefs, identity				
Comments:					
Total					



RUTGERS HEALTH

School of Health Professions

Occupational Therapy

RUTGERS UNIVERSITY OCCUPATIONAL THERAPY PROGRAM

LEVEL II FIELDWORK: FIELDWORK ATTESTATION FORM

Per ACOTE Standard C.1.3 and C.1.11: Document that academic and fieldwork educators agree on established fieldwork objectives prior to the start of the fieldwork experience and communicate with the student and fieldwork educator about progress and performance throughout the fieldwork experience. Document and verify that the student is supervised by a currently licensed or otherwise regulated OT or OTA (under the supervision of an OT) who has a minimum of 1 year of full-time practice experience prior to the onset of the Level II fieldwork. Ensure that the student supervisor is adequately prepared to serve as a fieldwork educator prior to the Level II fieldwork.

Please complete the following and return to AFWC:

In preparation for assuming the role of a Level II Fieldwork Educator for Rutgers University OTD student(s), I attest that (initial):

- ☐ I have ≥ 1 year of experience in this setting as a OTR (circle) following initial certification. I am a licensed OTR (circle) in the state of _____, where the fieldwork will be occurring:
License Number: _____ Date Issued: _____ Expiration Date: _____
 - ☐ I have received Rutgers University OTD program Level II Fieldwork objectives and/or have been given the opportunity to collaborate/share my site's SSLO's with the AFWC to implement mutually agreed upon site-specific objectives.
 - ☐ I have received, read, and understand the contents of the Rutgers University OTD Fieldwork Manual
-

Fieldwork Preparation:

I am prepared to supervise a Level II student based on my participation in the following (check all that apply):

- ☐ Communication with OTD program Academic Fieldwork Coordinator(emails, phone calls, site visits, etc.)
 - ☐ Attended an FWEd Workshop, such as one offered by AOTA or another entity
 - ☐ Previous role as a fieldwork educator. Number of students supervised: _____
 - ☐ Individual research/self-study (journals, self-assessments, etc., on FW and supervision)
 - ☐ Completed facility-based FW supervision training/mentoring programs
 - ☐ Attended AOTA FW Educators Program. Date Attended: _____
 - ☐ Completed AOTA "Self-Assessment Tool for Fieldwork Educator Competency"
 - ☐ Other (please specify) _____
-

Site-Specific Learning Objectives:

- ☐ I will use Rutgers University OTD Program Level II Fieldwork Objectives only.

- ☐ I will use a combination of Rutgers University OTD Program Level II Fieldwork Objectives and our site-specific objectives, as listed below or attached.
- ☐ I will use only our site-specific objectives listed below or attached.

If using the site's SSLO's, please include them below:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

Please return this form to:

Dana M. Richmond, OTD, OTR/L, MSCS
 Academic Fieldwork Coordinator
 Occupational Therapy Doctoral Program
 Department of Rehabilitation and Movement Sciences
 School of Health Professions
 Rutgers University
Dmr373@shp.rutgers.edu

FWEd Name and Credentials:	
FWEd Signature:	



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LEVEL I OR II FIELDWORK: EXAMPLE OF A LEARNING SUCCESS PLAN

Course Semester & Year:	
Course # and Name:	
Student Name:	
Primary Instructor(s):	
Student Advisor:	
Fieldwork Site:	
Fieldwork Educator:	

Key Elements Reflected from the Fieldwork Educator

Student Strengths:	
Fieldwork Educator Feedback and Areas of Concern:	
FWED Identified Areas of Concern Related to the Fieldwork Performance Evaluation:	

Key Elements Reflected from the Fieldwork Student

Student Strengths:	
Student Feedback Related to Fieldwork Experience and Identified Areas of Concern:	
Student Identified Areas of Concern Related to the Fieldwork Performance Evaluation:	

Learning Success Plan and Recommendations for Change:

Areas of Concern	Action Plan	Timeline for Completion	Date Completed

--	--	--	--

Meetings and Updates:

Meeting Date	Meeting Participants	Updates on Progress	Follow Up Activities

Additional comments, feedback, information:

Student Signature:		Date:	
FWED Signature:		Date:	
AFWC Signature:		Date:	
Student Advisor Signature:		Date:	