

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; 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.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 (ESIS) 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

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

Occupations: Client-directed occupations that match and support identified participation level goal (check all that apply)

ACOTE Standards C.1.8, C.1.11, C.1.12

Activities of Daily Living (ADL)

- Bathing/showering
- Toileting and toilet hygiene
- Dressing
- Swallowing/eating
- Feeding
- Functional mobility
- Personal device care
- Personal hygiene and grooming
- Sexual activity

Rest and Sleep

- Rest
- Sleep preparation
- Sleep participation

Play

Instrumental Activities of Daily Living (IADL)

- Care of others/pets
- Care of pets
- Child rearing
- Communication management
- Driving and community mobility
- Financial management
- Health management and maintenance
- Home establishment and management
- Meal preparation and clean up
- Religious / spiritual activities and expression
- Safety and emergency maintenance
- Shopping

Education

- Formal education participation
- Informal personal education needs exploration
- Informal personal education participation

Work

- Employment interests and pursuits
- Employment seeking and acquisition
- Job performance
- Retirement preparation and adjustment
- Volunteer exploration
- Volunteer participation



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	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
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		

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

Target caseload/productivity for fieldwork students:

Documentation: Frequency/Format (briefly describe) :



OPTIONAL DATA COLLECTION:

The question included 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 the 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:

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

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

D How are occupation-based needs evaluated and addressed in your OT program??

E Describe how you seek to include client-centered OT practice. How do clients participate in goal setting and intervention activities?

F Describe how psychosocial factors influence engagement in occupational therapy services.

G Describe how you address clients' community-based needs in your setting.

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

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. (continued)



8. Please describe the process for record keeping of supervisory sessions with a student, the student orientation process to the agency, OT services and the fieldwork experience. COCOTE 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

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