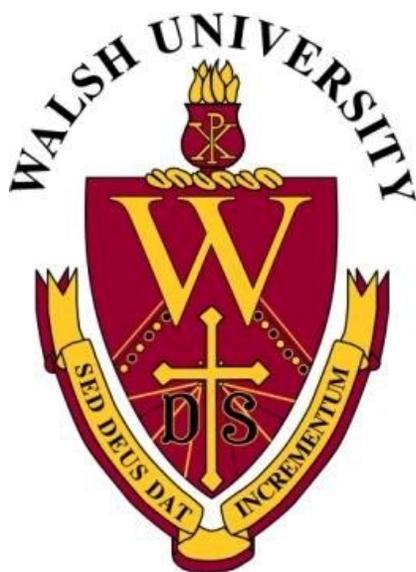


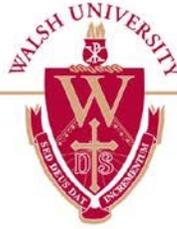
**WALSH UNIVERSITY
OCCUPATIONAL THERAPY PROGRAM**



**Level I Fieldwork Educator Manual
August 2018**

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School of Behavioral and Health Sciences

Occupational Therapy Program 330-490-7236

To: Walsh University Student Fieldwork Educator

Thank you for accepting a Walsh University Masters of Occupational Therapy Student to your site for fieldwork. It is our pleasure to partner with you as a local clinician to enhance student learning as we prepare entry-level occupational therapy practitioners. We thank you for your willingness to share you expertise and invest in our students.

Should you have any questions or concerns, please call or email:

Michele Tilstra, OTD, OTR/L, CHT

Academic Fieldwork Coordinator

Email: mtilstra@walsh.edu

Phone: 330-490-7410

Cell Phone: 330-472-4197

Thank you again and I look forward to working with you!

Michele Tilstra, OTD, OTR/L, CHT

Academic Fieldwork Coordinator



HEALTHCARE PROVIDERS SERVICE ORGANIZATION PURCHASING GROUP



Certificate of Insurance

OCCURRENCE POLICY FORM

Print Date: 9/05/2018

Producer Branch Prefix Policy Number Policy Period
018098 970 HPG 0127302749 from 09/01/18 to 09/01/19 at 12:01 AM Standard Time

Named Insured and Address:
Walsh University
2020 E Maple St
North Canton, OH 44720-3396

Program Administered by:
Nurses Service Organization
1100 Virginia Drive, Suite 250
Fort Washington, PA 19034
1-800-986-4627
www.nso.com

Medical Specialty: Code:
School Blanket - Healthcare Provider Students 80998

Insurance is provided by:
American Casualty Company of Reading, Pennsylvania
333 S. Wabash Avenue, Chicago, IL 60604

Professional Liability \$1,000,000 each claim \$ 5,000,000 aggregate

Your professional liability limits shown above include the following:
* Personal Injury Liability

Coverage Extensions

Table with 4 columns: Coverage Extension, Amount, Unit, and Aggregate Limit. Includes rows for Grievance Proceedings, Defendant Expense Benefit, Deposition Representation, Assault, Medical Payments, First Aid, and Damage to Property of Others.

Total: \$ 5,554.00

Base Premium \$5,554.00

Policy Forms & Endorsements(Please see attached list for a general description of many common policy forms and endorsements.)

G-144918-A CNA79561 G-144931-A34 G-144927-A

Handwritten signature of Chairman of the Board

Chairman of the Board

Handwritten signature of Secretary

Secretary

Keep this document in a safe place. It and proof of payment are your proof of coverage. There is no coverage in force unless the premium is paid in full. In order to activate your coverage, please remit premium in full by the effective date of this Certificate of Insurance.
Master Policy # 188711433

G-141241-B (03/2010)

Coverage Change Date:

Endorsement Change Date:

Walsh University Occupational Therapy Program

Program Mission

The mission of the Walsh University Occupational Therapy Program reflects the philosophy and vision of the profession of occupational therapy. The Occupational Therapy Program provides an educational experience that integrates active learning techniques, evidence-based practice, and collaboration with faculty who engage in scholarship. The program supports personal and professional growth through lifelong learning, critical thinking, professional behaviors, inter-professional collaboration, cultural awareness, and spirituality.

Graduates will facilitate participation in meaningful and necessary occupations with clients, families, and organizations within in their communities. Graduates will contribute to the future of the profession through leadership, scholarly activities and service. The Occupational Therapy Program supports the mission of Walsh University and the School of Behavioral and Health Sciences, which encourage individuals to act in accordance with reason guided by the example and teachings of Jesus Christ.

Program Philosophy

The use of occupation and occupational engagement as a means to enhance individual, community, and global health is fundamental to the profession of occupational therapy. We believe human beings have an innate desire to lead meaningful, productive lives. Participation in occupations enhances lives across the lifespan by maximizing functional ability and promoting self-determination. Occupational therapists provide professional services for individuals or groups to enhance the quality of occupational performance and participation in society. We view our students as active learners who require dynamic, realistic contexts to synthesize knowledge and develop critical thinking skills. We believe our students have an inherent desire to promote and advance the profession of occupational therapy through linking education to evidence-based practice and participating in scholarly activities.

Program Student Learning Outcomes (PSLOs)

Building on a solid grounding in the liberal arts, the graduate level program focuses on the development of students emphasizing those values and characteristics that will enable them to function as competent providers of occupational therapy services. Upon completion of the Occupational Therapy Program:

PSLO 1: Graduates will demonstrate core knowledge competencies in the foundations and basic tenets of occupational therapy.

PSLO 2: Graduates will apply clinical skills of screening, evaluation, intervention, and referral in occupational therapy service delivery.

PSLO 3: Graduates will support clinical decisions with relevant, current evidence.

PSLO 4: Graduates will model professional, ethical behaviors, and a respect for diversity in all interactions consistent with the profession of Occupational Therapy.

PSLO 5: Graduates will engage in service to communities at large.

To achieve these outcomes, the students must demonstrate the general knowledge, skill, and mindfulness of a competent occupational therapist who exhibits the Judeo-Christian values of Walsh University.

WALSH UNIVERSITY - MASTER OF OCCUPATIONAL THERAPY - CLASS OF 2019

Year 1								
Semester 1 - Fall August 28 - December 15, 2017		Semester 2 - Spring January 8 - April 27, 2018		Semester 3 - Summer May 2018 - August 2018				
Course Number	Course	Credit Hours	Course Number	Course	Credit Hours	Credit Hours		
OT 503/ OT 503L	Human Anatomy/Lab	6	OT 604	Psychosocial Aspects of Occupational Performance	3	OT 620	Evidence-Based Practice I	2
OT 502	Foundations of Occupational Therapy	3	OT 606	Therapeutic Interventions in Pediatrics	3	OT 614	Therapeutic Interventions in Adults and Geriatrics	4
OT 504	Conditions in Occupational Therapy	3	OT 608	Biomechanics in Occupational Therapy	3	OT 622	Level I Fieldwork - B (Service Project)/Seminar	2
OT 506	Task Analysis	1	OT 610	Neuroscience for the Occupational Therapist	3	OT 618	Therapeutic Groups	2
OT 602	OT Evaluation and Assessment Skills	3	OT 612	Level I Fieldwork - A/Seminar	2	OT 616	Environmental & Technological Interventions	2
	TOTAL SEMESTER CREDITS	16		TOTAL SEMESTER CREDITS	14		TOTAL SEMESTER CREDITS	12
Year 2								
Semester 4 - Fall August 2018 - December 2018		Semester 5 - Spring January 2019 - April 2019		Semester 6 - Summer May 2019 - August 2019				
Course Number	Course	Credit Hours	Course Number	Course	Credit Hours	Course Number	Course	Credit Hours
OT 628	Neuro-Cognitive Rehabilitation	2	OT 660	Level II Fieldwork - AB	7	OT 662	Level II Fieldwork - CD	7
OT 626	Occupational Therapy Management and Leadership	2	OT 634	Professional Issues, Ethics, and Trends in Occupational Therapy I	2	OT 636	Professional Issues, Ethics, and Trends in Occupational Therapy II	2
OT 624	Evidence-Based Practice II	2						
OT 632	Level I Fieldwork - C/Seminar	2						
OT 640, 642, 644, 646, 648 or 650	Elective	1						
OT 630	Advanced Clinical Reasoning	3						
	TOTAL SEMESTER CREDITS	12		TOTAL SEMESTER CREDITS	9		TOTAL SEMESTER CREDITS	9

TOTAL ACADEMIC CREDITS:	52
TOTAL FIELDWORK CREDITS:	20
TOTAL PROGRAM CREDITS:	72

FIELDWORK

Philosophy of Fieldwork

As an experiential learning process, fieldwork (FW) education represents an integral part of the total occupational therapy curriculum. Attainment of competencies as an occupational therapist depends upon integration of didactic and clinical learning experiences. While didactic education provides a basis for the development of appropriate problem solving abilities and a knowledge base, clinical education provides an opportunity for refinement of the knowledge, skills, and attitudes that characterize a competent, entry-level practitioner. Clinical education requires mutual endeavors by the academic faculty, the clinical faculty, and students to achieve the common goal of clinical competence. The academic faculty holds primary responsibility for didactically preparing students and coordinating their placements in appropriate clinical facilities. The clinical faculty provides appropriate learning experiences and evaluates students' performance. Responsibilities of students include recognition and communication of their own abilities and limitations according to academic level, previous clinical experiences, and personal attributes. All involved individuals must communicate efficiently and effectively to attain the overall goal of clinical competence.

Level I fieldwork (occurring during 3 semesters) provides students with hands-on learning and application in a wide variety of community-based settings with populations across the lifespan. In level II fieldwork, students are immersed in the OT field in 2-3 settings for 24 weeks total.

Progression of Fieldwork Placements:

- Level I A- Spring Semester; First year students; 2-8 hours at each setting; Observation and introduction to clinical settings with participation in professional conduct including interactions with clients and other professionals.
- Level I B- Summer Semester; First year students; 8-16 hours at each setting; Observation and participating in directed client treatments/ evaluations with direct line-of-sight supervision
- Level I C- Fall Semester; Second Year students; 24 hours in each setting; Students need to demonstrate problem-solving, treatment planning, choosing appropriate assessments, and documentation of both individual and group interventions.
- Level II AB- Spring- Second year students; Full Time clinic x 12 wks.; Students will need orientation and gradual build-up of responsibilities to function as occupational therapist with distant supervision.
- Level II CD- Summer- Second Year students; Full time clinic x 12 wks; Students should ramp up to supervision level fairly quickly with goal for end of rotation for student to be at entry-level competency.

Travel & Financial Responsibility

Students are responsible for the cost of travel and parking associated with the FWI experiences. The university does not provide assistance in locating housing; this is the student's responsibility.

HEALTH REQUIREMENTS FOR MOT STUDENTS **Physical and Mental Requirements for Program Admission**

Students matriculating in the Occupational Therapy Program at Walsh University must have:

- Adequate gross and fine motor ability for safe performance of patient examination and intervention procedures.
- Adequate visual, auditory, tactile and kinesthetic senses for obtaining accurate examination and investigative findings.
- Ability to think critically and solve problems.
- Ability to communicate effectively (oral, nonverbal and written).
- Ability to organize and effectively manage tasks.
- Adaptability to perform tasks with persons from diverse backgrounds in a variety of settings.

Physical and Mental Requirements upon Program Matriculation

To insure the safety of patients and students, students must follow certain health practices. Because of contractual agreements with community agencies, and because of the physical and mental demands of the profession (outlined

above), students must maintain an acceptable degree of health to remain within the program. This includes updating their health records to demonstrate adequate health and immunization.

- Students are expected to report any changes in their health status that will interfere with either their classroom or clinical performance.
- Students who experience dramatic changes in health that restrict their potential to meet the physical and mental demands of the profession will be reviewed on a case-by-case basis.
- Students who do not meet the health requirements of the program will not be permitted to participate in the clinical experience component of the program.

Faculty will monitor students' ability to perform technically to all standards and will address with students or take appropriate action as is deemed necessary for the safety of themselves, peers, faculty and the public.

Physical Examination

All Occupational Therapy students are required to submit certification of a complete physical examination to Castlebranch by August 15, signed by their physician or certified nurse practitioner prior to entry to the program. A standard form provided by the program prior to matriculation outlines all information and testing required. This form is included in the registration materials and students must complete and turn in the physical exam form by the due date stated in the registration materials by uploading the form to their Castlebranch accounts. In instances where clinical experiences require a physical examination within a specified time frame, students must obtain an examination with proper documentation prior to this clinical experience, or they may forfeit their opportunity for the experience.

Proof of Immunizations

Students must submit proof of immunization for the following:

- Measles, Mumps, Rubella, also known as MMR: 2 documented doses OR positive antibody titer
- Diphtheria, Pertussis and Tetanus, also known as DPT: complete documented childhood series as well as the adult booster (Tdap) in the past ten years,
- Varicella, also known as chickenpox: 2 documented doses OR history of disease documented by a physician, OR a positive antibody titer to document immunity,
- Hepatitis B: Three documented doses or positive antibody titer.
 - Students who refuse the hepatitis B series must sign the Walsh University Hepatitis B declination form. As most agencies now require the vaccination for students assigned for fieldwork experience, refusal of vaccination may limit choices for fieldwork experience.
- If no medical documentation exists for the above vaccinations, students must provide proof of immune status with positive antibody titers, which are quantitative blood tests. If the titers are negative and do not prove immune status, students must proceed with the required vaccinations and a follow-up titer may be required.
- Yearly influenza vaccine in the fall semester

Other Testing Required for the Program

- Two-step Tuberculosis Skin Testing, also known as Mantoux or PPD test, for tuberculosis.
 - It is students' responsibility to stay current with tuberculosis testing on an annual basis; failure to do so may result in loss of clinical placement.
 - If the skin testing is contraindicated, students may opt for the quantitative blood tests, QuantiFERON Gold or T-Spot.

Based upon the recent increase in the occurrence of the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV), the Occupational Safety and Health Agency (OSHA) has put into effect new standards for employers to follow for the protection of their employees with occupational exposure. Because of this, the Occupational Therapy Program developed policies regarding the protection of the students and the patients with whom they interact.

Medical Records

Students' medical records are stored electronically in their Castlebranch accounts. Students are required to keep personal copies of all medical records. Students who request copies of these records from the program office will be charged a fee. The program will not fax or email medical records to any facility without the explicit permission of the student.

Universal Precautions

To protect against exposure to communicable pathogens, such as HIV, HBV or TB, the program will instruct all students in the use of standard (universal) precautions. Students will treat all body fluids as if infectious while on clinical assignment. These requirements reflect federal law instituted by OSHA and as all employers must comply, all students must comply.

Pregnancy

Immediately upon medical confirmation, female students must report a pregnancy to the Program Director. Because safety to the student and the unborn child is the primary consideration, a medical authorization to continue the student's education during the pregnancy must be completed by the student's physician and returned to the Program Director.

Medical Insurance Coverage

Students must provide yearly proof of medical insurance coverage while they are in the program. Changes to a student's medical insurance coverage must be entered promptly into his or her Castlebranch account. If a student's name does not match the name on the insurance card, the student is required to submit proof from the insurance company that he/she is a dependent on the policy owner's policy. If there is any other dependent information listed on this document, those family member's information must be blacked out, leaving only the policy holder and student's information visible.

Post-Illness Readmission to Clinical Area

Students returning to a fieldwork experience after an illness must consider the nature of the illness as to whether they can practice safely. If the nature of the illness endangers either student or patient safety, the fieldwork supervisor, Clinical Fieldwork Coordinator or AFWC, may require that the student submit written documentation from the student's physician verifying that the student is able to return safely to the clinical area. The student will be readmitted to the clinical area at the discretion of the fieldwork supervisor or AFWC.

FIELDWORK EDUCATORS (FWE)

Evaluation of Fieldwork Educators. The Academic Fieldwork Coordinator (AFWC) or other designated faculty evaluates FWE effectiveness during on-site visits and/or other communications during fieldwork experiences. Verbal feedback is provided to the FWE on issues pertaining to planning educational experiences and how to effectively provide feedback and guidance on student fieldwork performance. The AFWC uses the information gained through site visits/midterm conferences, other communications, student assessment of fieldwork instruction and FWPE data to evaluate FWEs.

In the event an individual FWE's performance is a cause of concern for the student or the program during a fieldwork experience, the AFWC would communicate, either verbally or in writing, those concerns to the individual. The AFWC and the FWE would develop an individualized development plan for the FWE designed to strengthen areas of performance that need improvement.

Evaluation of Fieldwork Sites. The AFWC and other designated faculty evaluate the effectiveness of a fieldwork site on a regular basis by reviewing the quality of student fieldwork experiences in a selected time period. Quality is defined at minimum, to include: timely communication by FWE with the AFWC and/or student throughout a student fieldwork experience; opportunities offered to students and the program in regard to exposure to patients and practice management issues related to occupational therapy practice; and accurate assessment of student performance using the program developed forms (Level I) or American Occupational Therapy Association's Fieldwork Performance Evaluation (FWPE) (Level II). Feedback is provided to the fieldwork site through the FWE either verbally or in writing as needed about areas

of strengths and areas that may need further development in relation to the fieldwork education of students from the OT program.

FWE Responsibilities and Expectations.

Minimal expectations of FWEs during a student experience are:

- 1) Provide students with feedback on their performance and FWE expectations;
- 2) Identify areas that student needs to improve and any areas for concern;
- 3) Complete student assessment forms (program developed for Level I or FWPE for Level II);
- 4) Develop an ongoing, progressively challenging learning environment for students.

The American Journal of Occupational Therapy 7012410060p1

Occupational Therapy Fieldwork Education: Value and Purpose

The purpose of fieldwork education is to propel each generation of occupational therapy practitioners from the role of student to that of practitioner. Through the fieldwork experience, future practitioners achieve competence in applying the occupational therapy process and using evidence-based interventions to meet the occupational needs of a diverse client population. Fieldwork experiences may occur in a variety of practice settings, including medical, educational, and community-based programs. Moreover, fieldwork placements also present the opportunity to introduce occupational therapy services to new and emerging practice environments.

Fieldwork experiences constitute an integral part of the occupational therapy and occupational therapy assistant education curricula. Through fieldwork education, students learn to apply theoretical and scientific principles learned from their academic programs, to address actual client needs within the context of authentic practice environments. During fieldwork experiences, each student develops competency to ascertain client occupational performance needs to identify supports or barriers affecting health and participation, and to document interventions provided. Fieldwork education also provides opportunities for the student to develop advocacy, leadership, and managerial skills in a variety of practice settings, while incorporating principles of evidence-based practice and client-centered care. Finally, the student develops a professional identity as an occupational therapy practitioner, aligning his or her professional judgments and decisions with the American Occupational Therapy Association (AOTA) *Standards of Practice* (AOTA, 2015b) and the *Occupational Therapy Code of Ethics* (AOTA, 2015a).

As students proceed through their fieldwork experiences, performance expectations become progressively more challenging. *Level I fieldwork* experiences occur concurrently with academic coursework, and the goal “is to introduce students to the fieldwork experience, to apply knowledge to practice, and to develop understanding of the needs of clients” (Accreditation Council for Occupational Therapy Education® [ACOTE®], 2012, p. S61). Furthermore, Level I is “designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process” (ACOTE, 2012, p. S61).

Level II fieldwork experiences occur at or near the conclusion of the didactic phase of occupational therapy curricula and are designed to “develop competent, entry-level, generalist practitioners” (ACOTE, 2012, p. S62). Level II fieldwork features “in-depth experience(s) in delivering occupational therapy services to clients, focusing on the application of purposeful and meaningful occupation” (ACOTE, 2012, p. S62). For the occupational therapist student, there is an additional exposure to “research, administration, and management of occupational therapy services” (ACOTE, 2012, p. S62). Students should be “exposed to a variety of clients across the lifespan and to a variety of settings” (ACOTE, 2012, p. S62).

The value of fieldwork transcends the obvious benefits directed toward the student. Supervising students enhances fieldwork educators’ own professional development by providing exposure to current practice trends, evidence-based practice, and research. Moreover, the experience of fieldwork supervision is recognized by the

National Board for Certification in Occupational Therapy and many state regulatory boards as a legitimate venue for achieving continuing competency requirements for occupational therapy practitioners.

Another benefit to the fieldwork site of sponsoring a fieldwork education program is the recruitment of qualified occupational therapy personnel. Through the responsibilities expected during Level II fieldwork, occupational therapy staff and administration are given opportunity for an in-depth view of a student's potential as a future employee. In turn, an active fieldwork program allows the student, as a potential employee, to view firsthand the agency's commitment to the professional growth of its occupational therapy personnel and to determine the fit of his or her professional goals with agency goals. The fieldwork program also creates a progressive, state-of-the-art image to the professional community, consumers, and other external audiences through its partnership with the academic programs.

In summary, fieldwork education is an essential bridge between academic education and authentic occupational therapy practice. Through the collaboration between academic faculty and fieldwork educators, students are given the opportunity to achieve the competencies necessary to meet the present and future occupational needs of individuals, groups and, indeed, society as a whole.

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Adopted by the Representative Assembly 2016

Note. This document replaces the 2009 document *Occupational Therapy Fieldwork Education: Value and Purpose*, previously published and copyrighted in 2009 by the American Occupational Therapy Association in the *American Journal of Occupational Therapy*, 63, 821–822. <http://dx.doi.org/10.5014/ajot.63.6.821> Copyright © 2016 by the American Occupational Therapy Association.

Citation. American Occupational Therapy Association. (2016). Occupational therapy fieldwork education: Value and purpose. *American Journal of Occupational Therapy*, 70(Suppl. 2), 7012410060. <http://dx.doi.org/10.5014/ajot.2016.706S06>

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Level I Fieldwork

<https://www.aota.org/Education-Careers/Fieldwork/LevelI.aspx>

I. Definition and Purpose

The AOTA Standards describe the goal of Level I Fieldwork "to introduce students to the fieldwork experience, and develop a basic comfort level with an understanding of the needs of clients." Level I Fieldwork is not intended to develop independent performance, but to "include experiences designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process." Services may be provided to a variety of populations through a variety of settings. Experiences may include those directly related to occupational therapy, as well as other situations to enhance an understanding of the developmental stages, tasks, and roles of individuals throughout the life span. Day care centers, schools, neighborhood centers, hospice, homeless shelters, community mental health centers, and therapeutic activity or work centers are among the many possible sites. Level I Fieldwork may also include services management and administrative experiences in occupational therapy settings, community agencies, or environmental analysis experiences. Populations may include disabled or well populations; age-specific or diagnosis-specific clients. Qualified personnel for supervision of Level I Fieldwork may include, but are not limited to, academic or fieldwork educators, occupational therapy practitioners initially certified nationally, psychologists, physician assistants, teachers, social workers, nurses, physical therapists, social workers, etc. The supervisors must be knowledgeable about occupational therapy and cognizant of the goals and objectives of the Level I Fieldwork experience.

II. Objectives

Objectives of Level I Fieldwork may vary significantly from one academic institution to another. These variations occur as a result of differences in individual academic institutional missions, programmatic philosophical base, curriculum design and resources, etc. As a result, the individual academic institutions should provide information regarding the specific didactic relationship and should provide objectives for the experience. Fieldwork educators should determine if the resources of their facilities are adequate to meet the objectives of the educational institution, and then apply the objectives to the fieldwork setting.

Fieldwork objectives should reflect role delineation between professional and technical level students as specified by *The Guide to OT Practice*, AJOT, Vol.53, No.3. In the event a facility provides Level I Fieldwork experiences to both levels of students, separate objectives and learning experiences should be utilized, as developed by the academic program faculty. Students should be evaluated using these objectives. In instances where students will have a prolonged/consecutive fieldwork experience in the same facility, the objectives should also reflect a sequential orientation and move from concrete to conceptual or from simple to more complex learning activities. In the event that the student will rotate through a variety of settings it is recommended that a master list of objectives be developed that demonstrate a developmental learning continuum and indicate which objectives/learning experiences have been provided in previous experiences. Schedule design of Level I Fieldwork will depend on the type of setting and the curriculum of the academic institution. Options include, but are not limited to, full days for one-half a term, full days in alternating weeks for one term, half days for one term, or one week.

Academic Institution

- Identify course content areas to be enhanced by Level I Fieldwork experiences.
- Develop general goals that clearly reflect the purpose of the experience and level of performance to be achieved.
- Assure that objectives reflect the appropriate role of an OT or OTA student.
- Sequence the objectives from concrete to conceptual or from simple to increasing complexity.
- Identify facilities that may be able to provide the necessary learning experiences.
- Share the objectives with the fieldwork educators and ask them to identify those objectives that could be met in their facility.
- Discuss and coordinate fieldwork administration issues, such as scheduling, work load, report deadlines, etc.
- Collaborate with fieldwork educators to clearly identify the skill levels necessary for successful completion of Level I Fieldwork experience.
- Develop an evaluation form and protocol.

Fieldwork Education Center

- Evaluate administrative aspects of the program to determine the feasibility of providing education experiences of high quality while maintaining the effectiveness of services. Some considerations are: providing the necessary supervision, scheduling learning experiences, and staff attitudes toward.
- Review objectives and learning experiences with academic representatives to assure that they address the Level I Fieldwork objectives of the program.
- Review the evaluation form and associated protocols and seek any necessary clarification prior to its implementation.
- Review the Level I Fieldwork objectives and the evaluation form to determine if the learning experiences can be provided at your fieldwork agency and if they are compatible with the philosophy of the program.
- In collaboration with the academic program faculty, identify, and design, if possible, specific learning activities which will meet Level I objectives.
- Those agencies providing fieldwork for both the professional and technical level student should have different learning experiences designed to clearly reflect role delineation.

AOTA Commission on Education (COE) and Fieldwork Issues Committee (FWIC) Amended and Approved by FWIC 11/99 and COE 12/99

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Occupational Therapy:
Living Life To Its Fullest

OT/OTA Student Supervision & Medicare Requirements

Historically, OT and OTA students have participated in the delivery of occupational therapy services under the supervision of occupational therapy personnel in a variety of fieldwork sites. The following provides information about the way in which the Centers for Medicare & Medicaid Services (CMS) interprets how and whether the Medicare program should provide payment for services provided by students.

In the article "Strategies for Creative Fieldwork Opportunities," AOTA's Academic Affairs, Federal Affairs, Practice, and Reimbursement and Regulatory Policy staff provide guidance for occupational therapy programs, fieldwork sites, and facilities.

For those settings that serve Medicare patients, it is important to be aware of both new and existing Medicare payment policies. CMS has published specific criteria relating to how and when the program will pay for services when the student

participates in service delivery. When developing fieldwork plans for sites that serve Medicare patients, two issues must be considered:

1. Whether Medicare payment rules specifically allow students to participate in the delivery of services to Medicare beneficiaries, and
2. What type and level of supervision are required by the Medicare program.

All relevant Medicare coverage criteria must be reviewed if reimbursement is sought for services when the student participates in service delivery. In addition, many state practice acts and regulations address occupational therapy services provided by students. You can find the regulatory board contact information on the State-by-State OT Law Database located in the Licensure section of this Web site. For details regarding AOTA's position on level II fieldwork, please see the document Practice Advisory: Services Provided by Students in Fieldwork Level II Settings.

The following chart sets out for each Medicare setting whether Medicare payment rules specifically allow or restrict coverage of services provided by students and what type and level of supervision Medicare requires to raise the services provided by students to the level of covered "skilled" occupational therapy. Practitioners should take care to ensure an appropriate level of supervision, whether or not a specific CMS rule regarding students has been issued.

Medicare Coverage of Services When a Student Participates in Service Delivery

- **Medicare Part A—Hospital and Inpatient Rehabilitation Type and Level of Supervision of Student Required:** CMS has not issued specific rules, but in the excerpt here referencing skilled nursing facilities (SNFs), CMS mentions other inpatient settings. In the Final SNF PPS Rule for FY 2012 (76 Fed. Reg. 48510-48511), CMS stated: *“We are hereby discontinuing the policy announced in the FY 2000 final rule’s preamble requiring line-of-sight supervision of therapy students in SNFs, as set forth in the FY 2012 proposed rule. Instead, effective October 1, 2011, as with other inpatient settings, each SNF/provider will determine for itself the appropriate manner of supervision of therapy students consistent with state and local laws and practice standards.”* See relevant state law for further guidance on supervision for the services to be considered occupational therapy.
- **Medicare Part A—SNF Type and Level of Supervision of Student Required:** The minutes of therapy services provided by OT and OTA students may be recorded on the MDS as minutes of therapy received by the beneficiary.

Before October 1, 2011, services of OT and OTA students had to be provided in the "line of sight" of the OT. OTAs could provide clinical supervision to OTA students; however, if the services were to be recorded for payment purposes, they had to be performed in "line of sight" of an OT.

CURRENT POLICY: Effective October 1, 2011, line-of-sight supervision is no longer required in the SNF setting (76 Fed. Reg. 48510-48511). The time the student spends with a patient will continue to be billed as if it were the supervising therapist alone providing the therapy, meaning that a therapy student's time is not separately reimbursable. See the RAI Manual for the Minimum Data Set, Version 3.0 (MDS 3.0 RAI Manual), Chapter 3, Section O Therapies for more details and examples (<http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAIManual.html>). According to the MDS 3.0 RAI Manual, supervising therapists and therapy assistants within individual facilities must determine whether or not a student is ready to treat patients without line-of-sight supervision. The supervising therapist/assistant may not be engaged in any other activity or treatment, with the exception of documenting. It is AOTA's policy that OTAs may supervise OTA students, not OT students.

o **Because of advocacy by AOTA, CMS has posted Recommended Guidelines by AOTA, APTA, and ASHA on its SNF PPS Web site:** <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/Spotlight.html> (see Student Supervision Guidelines under “Downloads”). AOTA, APTA, and ASHA worked together to develop suggested guidelines for CMS to incorporate into its guidance on student supervision. CMS recognized the guidelines and posted them on its Web site. In the final rule, CMS stated, “we appreciate the detailed supervision guidelines that several of the trade associations have developed, which we

recognize as playing a significant role in helping to define the applicable standards of practice on which providers rely in this context.”

Recommended Skilled Nursing Facility Therapy Student Supervision Guidelines Submitted to CMS by the American Occupational Therapy Association (AOTA) during the comment period for the FY 2012 SNF PPS Final Rule

Please note, these suggested guidelines would be in addition to the student supervision guidelines outlined in the RAI MDS 3.0 Manual and all relevant Federal Regulations

- The amount and type of supervision as determined by the supervising therapist/assistant must be appropriate to the student’s documented level of knowledge, experience, and competence.
 - Students who have been approved by the supervising therapist or assistant to practice independently in selected patient/client situations can perform those selected patient/client services without line-of-sight supervision by the supervising therapist/assistant.
 - The supervising therapist/assistant must be physically present in the facility and immediately available to provide observation, guidance, and feedback as needed when the student is providing services at all levels of supervision.
 - When the supervising therapist/assistant has approved the student to perform medically necessary patient/client services and the student provides the appropriate services, the services will be counted on the MDS as skilled therapy minutes.
 - The supervising therapist/assistant is required to review and sign all students’ patient/client documentation for all levels of clinical experience and retains full responsibility for the care of the patient/client.
 - The supervising therapist/assistant is required to have one year of practice experience prior to supervising any students.
 - Students who have not been approved by the supervising therapist/assistant to practice independently require line-of-sight supervision by the qualified therapist/assistant during all services. In addition, under these circumstances the supervising therapist/assistant will have direct contact with the patient/client each visit.
- **Medicare Part A—Hospice Type and Level of Supervision of Student Required:** CMS has not issued specific rules. AOTA is recommending that the approach for Part A inpatient settings be followed for hospice providers. See relevant state law for further guidance on supervision for the services to be considered occupational therapy.
 - **Medicare Part A—Home health Type and Level of Supervision of Student Required:** Regulations (§484.115) specifically cite definitions for "qualified personnel", which do not include students. However, CMS has not issued specific restrictions regarding students providing services in conjunction with a qualified OT or OTA. Services by students can be provided (as allowed by state law) as part of a home health visit, when the student is supervised by an OT or OTA in the home. AOTA is recommending that the approach for Part A inpatient settings be followed for home health agencies. See relevant state law for further guidance on supervision for the services to be considered occupational therapy.
 - **Medicare Part B—Private Practice, Hospital Outpatient, SNF, CORF, ORF, Rehabilitation agency, and other Part B providers including home health agencies when providing Part B services Type and Level of Supervision of Student Required:** Under the Medicare Part B outpatient benefit, the services of students directly assisting a qualified practitioner (OT) are covered when the type and level of supervision requirements are met as follows: Students can participate in the delivery of services when the qualified practitioner (OT) is directing the service, making the skilled judgment, responsible for the assessment and treatment in the same room as the student, and not simultaneously treating another patient. The qualified practitioner is solely responsible and must sign all documentation.

For details about current student supervision guidelines that affect Part B in SNFs in particular, see <http://aota.org/News/AdvocacyNews/SNF-Students.aspx?FT=.pdf>.

Following is guidance to the entities that pay for Medicare benefits contained in the Medicare Benefit Policy Manual, Chapter 15 – see Section 230B: **1. General**

Only the services of the therapist can be billed and paid under Medicare Part B. The services performed by a student are not reimbursed even if provided under “line of sight” supervision of the therapist; however, the presence of the student “in the room” does not make the service unbillable. Pay for the direct (one-to-one) patient contact services of the physician or therapist provided to Medicare Part B patients. Group therapy services performed by a therapist or physician may be billed when a student is also present “in the room”.

EXAMPLES:

Therapists may bill and be paid for the provision of services in the following scenarios:

- The qualified practitioner is present and in the room for the entire session. The student participates in the delivery of services when the qualified practitioner is directing the service, making the skilled judgment, and is responsible for the assessment and treatment.
- The qualified practitioner is present in the room guiding the student in service delivery when the therapy student and the therapy assistant student are participating in the provision of services, and the practitioner is not engaged in treating another patient or doing other tasks at the same time.
- The qualified practitioner is responsible for the services and as such, signs all documentation. (A student may, of course, also sign but it is not necessary since the Part B payment is for the clinician’s service, not for the student’s services).

AOTA continues to work with a coalition of practitioner organizations to advocate for additional government support for education of allied health providers and to develop long-term solutions to the problems caused by Medicare’s limitations on reimbursement when students participate in service delivery.

HIPAA Guidelines for Fieldwork

<https://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx><https://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx><https://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx><https://www.aota.org/Education-Careers/Fieldwork/Supervisor/HIPAA.aspx>

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

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

For written reports, the following information can be shared:

- Age (age 90 and over must be aggregated to prevent the identification of older individuals)

- Race
- Ethnicity
- Marital Status
- Codes (a random code may be used to link cases, as long as the code does not contain, or be a derivative of, the person's social security number, date of birth, phone/fax numbers, etc.)

Students, as well as therapists, often keep "working files" in their desk. This is still allowed under HIPAA guidelines, however this information must be locked in a file cabinet when not in use, and must be shredded when no longer needed.

Resource:
[HIPAA Frequently Asked Questions](https://www.aota.org/Education-Careers/Fieldwork/Answers.aspx)

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Answers to Your Fieldwork Questions

<https://www.aota.org/Education-Careers/Fieldwork/Answers.aspx>

This information provides answers to students about fieldwork requirements, supervision, grading, difficulties with supervisors, failing, unfair treatment, accommodations for a disability, and international fieldwork.

Who Sets Fieldwork Requirements?

The Standards for an Accredited Educational Program for the Occupational Therapist or Occupational Therapy Assistant are the official AOTA documents that govern the length and types of fieldwork required for all students.

How Many Hours are Required for Level I and Level II Fieldwork?

For Level I Fieldwork, AOTA does not require a minimum number of hours. Each program sets the time requirements for students on Level I Fieldwork. For Level II Fieldwork, the Standards require a minimum of 24 weeks full-time for occupational therapy students and 16 weeks full-time for occupational therapy assistant students. This may be completed on a full-time or part-time basis, but may not be less than half-time, as defined by the fieldwork site. Your academic program determines the required time needed to complete both Level I and II fieldwork in your program. All students must complete the fieldwork required by their academic programs.

Are There Mandatory Types of Level II Fieldwork Required for All Students?

The Standards recommend that the student be exposed to a variety of clients across the life span and to a variety of settings. While AOTA does not mandate specific types of fieldwork, such as pediatrics or physical disabilities, individual academic programs do have the right to require specific types of fieldwork placement for their students.

How Many Days Off Are Allowed?

Time off during fieldwork is decided by the fieldwork site and the academic program. You should direct any questions about taking time off to your academic fieldwork coordinator and your fieldwork educator.

How Many Times May a Student Repeat Level II Fieldwork?

Because fieldwork is considered a part of your academic program, your school sets the policy on repeating Level II fieldwork. Check your college catalog or student handbook for a statement of your program's policy. Also, discuss this issue with your academic fieldwork coordinator to be sure that you understand the policy at your institution.

How Much Time Do You Have To Finish Level II Fieldwork?

The Standards do not specify time requirements for completion of Level II fieldwork. It should be completed in a reasonable amount of time. You should consult with your academic program if there are unusual circumstances that might make it difficult for you to complete fieldwork within their required time period.

Who is Permitted to Supervise Students?

For Level I fieldwork, a student can be supervised by qualified personnel including, but not limited to, occupational therapy practitioners with initial national certification, psychologists, physician assistants, teachers, social workers, nurses, and physical therapists.

For Level II fieldwork, an occupational therapist can supervise an occupational therapy student as long as the therapist meets state regulations and has a minimum of 1 year of practice experience subsequent to the requisite initial certification. An occupational therapist or occupational therapy assistant who meets state regulations and has 1 year of practice experience subsequent to the requisite initial certification can supervise an occupational therapy assistant student.

What is a Passing Grade for Level II Fieldwork?

Each academic program is responsible for determining its grading criteria. The academic program has the responsibility to assign a letter grade or pass/fail grade, and to determine the number of credit hours to be awarded for fieldwork.

What should you do if your fieldwork grade is lower than you believe you deserve?

Because fieldwork is considered part of your academic program, you will need to follow whatever grade appeal process your program or college requires. The steps involved in that process should be outlined in your college catalog or student handbook. Your academic program makes the final decision on your fieldwork grade.

What Should You Do if You Are Asked To Perform Above or Outside Your Level of Practice?

First, discuss this with your fieldwork educator. You may wish to check with the licensure board in the state where you are doing fieldwork for information defining the scope of practice. If you are unable to resolve this issue with the fieldwork site, contact your academic fieldwork coordinator.

What Should You Do if You Are Experiencing Difficulty During Level II Fieldwork?

The first step is to talk with your fieldwork educator. Before your meeting, try to write down what you perceive as the problems and develop a list of possible solutions. If you are still experiencing difficulty after meeting with your fieldwork educator, contact the academic fieldwork coordinator at your school for a different perspective and advice on other possible solutions. It is very important that the academic fieldwork coordinator hear from you if you are experiencing difficulty.

What Happens if You Fail Fieldwork and You Believe You Should Pass?

First, discuss the situation with your academic fieldwork coordinator. Should you wish to appeal your grade, you must follow the procedures required by your academic program or college. Check your student handbook or college catalog, or contact the Student Affairs office to learn about your school's procedure. Also, find out what your program's policy is on repeating a failed fieldwork. If repeating is a possibility, you should request another fieldwork placement to make up for the prior failure.

Can Your School Drop You From the Program for Failing Fieldwork? What Options Would You Have To Get a Degree?

Each academic program determines its own criteria for dropping a student from the program. You need to find out your school's policy. You may wish to appeal the decision according to the procedure for your school or program. Some possible options for students who have been dropped from occupational therapy education programs include transfer to another major that may have similar course requirements; career counseling; or application to another occupational therapy program. Should you decide to apply to another occupational therapy education program, be aware that the prospective school decides on whether or not your course credits will be accepted.

Are You Required To Tell the Fieldwork Site That You Have a Disability?

Under the Americans with Disability Act, occupational and occupational therapy assistant students with disabilities have the right to decide if and when they disclose their disability to the fieldwork site. AOTA does not have a “requirement” related to disclosure of disabilities as it falls under Federal law that would supersede any requirement that existed. It is recommended that if you determine that you will need accommodations to fulfill the essential job functions for a student in your fieldwork setting that this information be disclosed to the fieldwork site before you start your placement. Passing fieldwork level II is based on your ability to demonstrate entry-level competencies by the completion of the placement and you want to make sure that if accommodations are needed that they are reasonable and in place. Make sure to discuss your decision to disclose with your academic fieldwork coordinator.

How Can You Find a Fieldwork Site Outside of Your State or Region?

First, you should talk with your academic fieldwork coordinator for suggestions. Generally speaking, it is not appropriate for students to contact fieldwork sites independently unless they are told to do so by their school. Another source of information is the state occupational therapy association in the state where you wish to find a fieldwork site. View a list of State OT Associations contacts. AOTA does not maintain a listing of current fieldwork sites.

Can You Do a Level II Fieldwork Outside of the U.S.?

Yes, depending on the policies of your academic program, you can do fieldwork outside the U.S., as long as the criteria listed in the Standards are followed. This is the criteria that must be met: "Ensure that the student completing Level II fieldwork outside the U.S. is supervised by an occupational therapist who has graduated from a program approved by the World Federation of Occupational Therapists (WFOT) and has 1 year of experience in practice. Such fieldwork shall not exceed 12 weeks."

How Do You Go About Filing a Formal Complaint if You Feel That You Have Been Treated Unfairly?

If you have not been able to resolve an unsatisfactory fieldwork situation with your academic program, you may wish to pursue a formal grievance procedure at your school. To do so, you must follow the steps outlined in the written information on your school or program's grievance process. See your program director for details.

What if I Believe That the Occupational Therapy Program at My School Is Not in Compliance With the Standards for an Accredited Educational Program for the OT or OTA?

You may initiate a formal complaint in letter form to the Accreditation Council For Occupational Therapy Education (ACOTE). ACOTE requires the complainant to demonstrate that reasonable efforts have been made to resolve the complaint, or to demonstrate that such efforts would be unsuccessful. ACOTE will not intervene on behalf of individuals or act as a court of appeal for students in matters of admission or dismissal. ACOTE will intervene only when it believes practices or conditions indicate the program may not be in substantial compliance with accreditation standards or established policies. For more information on the complaint procedure, see Accreditation Administrative Procedures.

What if I Believe That My Legal Rights Have Been Violated?

In this case, you may wish to consider seeking legal counsel. You should be aware that the courts have a history of upholding the judgement of professional educators on questions of student performance, but may rule in favor of the student when due process or civil rights have been violated.

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