**AOTA FIELDWORK DATA FORM**

**Date**: 08/9/2015

**Name of Facility:** Vanderbilt University Medical Center

**Address:** 1313 21st St Ave S. Rm 1004 Oxford House **City:** Nashville S**tate:** TN  **Zip:** 37232-4675

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| **FW Level II** |  | **FW Level I (if different)** |  |
| **Contact Person:** Lynette O’Brien | **Credentials:** OTR/L | **Contact Person:** | **Credentials:** |
| **Phone:** 615-343-6354      **E-mail:** lynette.m.o.brien@vanderbilt.edu | | **Phone:** **E-mail:** | |

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| **Director:** Heather Skaar, PT,  Manager: Kelly Floyd, MS, OTR/L |  | **Corporate Status:**  For Profit  Non-Profit  State Gov’t  Federal Gov’t | **Preferred Sequence of FW:** *ACOTE Standards B.10.6*  Any  Second/Third only; 1st must be in:  Full-time only  Part-time option  Prefer Full-time |
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| **Web site address:** http://www.mc.vanderbilt.edu/root/vumc.php?site=rehabilitationservices&doc=26342 |
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| **OT Fieldwork Practice Settings** (ACOTE Form A #s noted) : **(Double Click on boxes to check)** | |  |  |  |  |
| **Hospital-based settings** | **Community-based settings** | | **School-based settings** | **Age Groups:** | **Number of Staff:** |
| In-Patient Acute 1.1  In-Patient Rehab 1.2  SNF/ Sub-Acute/ Acute Long-Term Care 1.3  General Rehab Outpatient 1.4  Outpatient Hands 1.5  Pediatric Hospital/Unit 1.6  Peds Hospital Outpatient 1.7  In-Patient Psych 1.8 | Peds Community 2.1  Behavioral Health Community 2.2  Older Adult Community Living 2.3  Older Adult Day Program 2.4  Outpatient/hand private practice 2.5  Adult Day Program for DD 2.6  Home Health 2.7  Peds Outpatient Clinic 2.8 | | Early Intervention 3.1  School 3.2  **Other area(s**)  please specify: | 0-5  6-12  13-21  22-64  65+ | OTRs: 19  COTAs: 7  Aides: 3  PT: 23  Speech: Unknown  Resource Teacher: 0  Counselor/Psychologist: Yes: Numerous  Other: N/A |

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| **Student Requirements/Prerequisites** (check all that apply)  **(Double Click on boxes to check)** *ACOTE B.10.6* | |  | **Health requirements**: |  |
| CPR  type required: Adult  Medicare / Medicaid Fraud Check  Criminal Background Check  Child Protection/abuse check  Adult abuse check  Fingerprinting | First Aid  Infection Control training  HIPAA Training  Prof. Liability Ins.  Own transportation  Interview | | HepB  MMR  Tetanus  Chest x-ray  Drug screening  #\_\_\_\_\_Panel  TB/Mantoux | Physical Check up  Varicella  Influenza  Please list any other requirements: \*\*Vanderbilt has a Health Screening form that must be completed. Please see the rehab services website for this form\*\* |

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| **Aspects of Occupational Therapy’s Domain addressed in this setting (check all that apply) Double Click on boxes to check**  **\*Refer to the OT Practice Framework –II (2008) for descriptions and definitions…available through AOTA** | | |
| **Areas of Occupation**  Activities of Daily Living (ADL)  Instrumental ADL  Rest and Sleep  Education  Work  Play  Leisure  Social Participation  **Client Factors**  Values, Beliefs and Spirituality  Body Functions  Body Structures | **Performance Skills**  Sensory-Perceptual Skills  Motor and Praxis Skills  Emotional Regulation Skills  Cognitive Skills  Communication and Social Skills  **Performance Patterns**  Habits  Routines  Roles  Rituals | **Context and Environment**  Cultural  Personal.  Physical  Social  Temporal.  Virtual  **Activity Demands**  Objects used and their properties  Space Demands  Social Demands  Sequencing and Timing  Required Actions  Required Body Functions  Required Body Structures |

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| **Most common services priorities** (check all that apply)  **(Double Click on boxes to check)** | |  |  |  |
| Direct service  Discharge planning  Evaluation | Meetings(team, department, family)  Client education  Intervention | | Consultation  In-service training | Billing  Documentation |

**Types of OT Interventions addressed in this setting** (check all that apply): **\*** *ACOTE Standards A.5.3, B.10.1, B.10.3, B.10.11, B.10.13, B.10.15, B.10.19, B.10.20*

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| **Areas of Occupation addressed in this setting - within client’s own environmental context** (check all that apply)**:**  **(Double Click on boxes to check)** | | | | | |
| **Activities of Daily Living (ADL)** | **Instrumental Activities of Daily Living (IADL)** | | | **Education** | |
| Bathing/showering  Bowel and bladder mgmt  Dressing  Eating  Feeding  Functional mobility  Personal device care  Personal hygiene & grooming  Sexual activity  Toilet hygiene  **Rest and Sleep**  Rest  Sleep  Sleep preparation  Sleep participation  **Play**  Play exploration  Play participation | Care of others (selecting/supervising caregivers)  Care of pets  Child rearing  Communication management  Community mobility  Financial management  Health management & maintenance  Home establishment & management  Meal preparation & clean up  Religious observance  Safety procedures & emergency maintenance  Shopping  **Leisure**  Leisure exploration  Leisure participation | | | Formal education participation  Informal personal educational needs or interests exploration  Informal personal education participation | |
|  |  | | | **Work**  Employment interests & pursuits  Employment seeking and acquisition  Job performance  Retirement preparation & adjustment  Volunteer exploration / participation  **Social Participation**  Community  Family  Peer/friend | |
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| **Types of Occupational Therapy Interventions: (Double Click on boxes to check)**  **Occupation-based Intervention –** client engages in client-directed occupations that match identified goals  **Purposeful Activity-** client engages in specifically selected activities that allow the client to develop skills that enhance occupational engagement | **Preparatory Methods –** practitioner selects directed methods and techniques that prepare the client for occupational performance.  **Consultation Process –** using knowledge and expertise to collaborate with the client | | | **Education Process –** imparting knowledge and information about occupation, health and participation that does not result in actual performance of the occupation/activity  **Advocacy** – efforts directed toward promoting occupational justice and empowering clients to seek and obtain resources to fully participate in their daily life occupations | |
| **Method of Intervention**  **Direct Services/case load for entry-level OT**  One-to-one:  Small group(s):  Large group:  **Discharge Outcomes of clients**  Home  Another medical facility  Home Health/Inpt/SNF  **OT Intervention Approaches**  Create, promote (health promotion)  Establish, restore, (remediation)  Maintain  Modify, (compensation, adaptation)  Prevent, (disability prevention) | **Outcomes of Intervention**  Occupational performance  Adaptation  Health & Wellness  Participation  Prevention  Quality of Life  Role Competence  Self-Advocacy  Occupational Justice | | | **Theory/ Frames of Reference/ Models of Practice**  Biomechanical  Cognitive - Behavioral  Cognitive Disability  Model of Human Occupation (MOHO)  Occupational Adaptation  Person/ Environment/ Occupation (P-E-O)  Person-Environment-Occupational Performance  (PEOP)  Rehabilitation  Sensory Integration  Social Learning Theory  Stages of change/Transtheoretical Model        Other (please list): | |
| **Please list most common screenings and evaluations used in your setting**: No screenings, but an informal facility developed evaluation is used. Therapists at times will use the MOCA, SLUMS, Short Blessed during an eval/tx. | | | | |
| **Identify safety precautions important at your FW site**  **(Double Click on boxes to check)** | |  |  | | |
| Medications  Post-surgical (list procedures)  Contact guard for ambulation  Fall risk  Other (describe): | |  | Swallowing/ choking risks  Behavioral system/ privilege level (locked areas, grounds)  Sharps count  1:1 safety/ suicide precautions | | |
| **Please list how students should prepare for a FW II placement such as doing readings, learn specific evaluations and interventions used in your setting:** Each student is encouraged to contact his/her FE prior to the start date to obtain information about your specific patient populations(s). You may be instructed to familiarize yourself with specific diagnoses, evaluations etc. | | | | |

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| **Target caseload/ productivity for fieldwork students:**  **(Double Click on boxes to check)** | **Documentation: Frequency/ Format** (briefly describe) :  **(Double Click on boxes to check)** |
| Productivity % per 40 hour work week: Not calculated. See comments below.  Caseload expectation at end of FW: 7-8 patients a day  Productivity % per 8 hour day: 18 units a day during the last 2 weeks of the clinical to meet entry level functioning expectation in this setting.  # Groups per day expectation at end of FW: None | Hand-written documentation:  Computerized Medical Records:  Time frame requirements to complete documentation: Same day as the evaluation or treatment. |

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| **Administrative/ Management duties or responsibilities of the OT/ OTA student:** | **Student Assignments. Students will be expected to successfully complete:** |
| Schedule own clients  Supervision of others (Level I students, aides, OTA,  volunteers)  Budgeting  Procuring supplies (shopping for cooking groups, client/  intervention related items)  Participating in supply or environmental maintenance  Other: | Research/ EBP/ Literature review  In-service or project determined between the student and FE.  Case study  Participate in in-services/ grand rounds  Fieldwork Project ( describe):  Field visits/ rotations to other areas of service  Observation of other units/ disciplines  Other assignments (please list): Either a case study, in-service or project is expected of the student. FE will assist the student in the determination of appropriate assignment. |

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| **Student work schedule & outside study expected: (Double Click on boxes to check)** |  | **Describe level of structure for student?** | **Describe level of supervisory support for student?** |
| Schedule hrs/ week/ day: 40+ hours a week | Room provided YES  NO | High | High |
| Do students work weekends? YES  NO | Meals  YES NO | Moderate | Moderate |
| Do students work evenings? YES  NO  **Acceptable Dress Code for the site**: Solid colored scrubs and tennis shoes. No lab coat. A name tag will be provided. | Stipend amount: 0  Describe public transportation available: MTA bus at no charge; shuttle bus free of charge from satellite parking lot | Low | Low |
| **Describe the FW environment/ atmosphere for student learning**:  **Supervisory patterns–Description** (respond to all that apply)  1:1 Supervision Model: At times the student may be supervised by another therapist (ie. Your FE is on vacation or out sick)  Multiple students supervised by one supervisor:  Collaborative Supervision Model:  Multiple supervisors share supervision of one student, # supervisors per student:  Non-OT supervisors: | | | |

**ACOTE Standards Documentation for Fieldwork** (may be completed by AFWC or FWII student interview of FW Educator)

Please answer as many of these as you can. When possible, the AFWC may interview you to answer questions.

1. **Please complete the Occupational Therapy Staff Profile form** **(see last page)** *ACOTE Standards B.7.10, B10.12, B.10.17* **(Double Click on boxes to check)**

**Will the student(s) be supervised by a currently licensed or credentialed occupational therapist who has a minimum of 1 year of practice experience subsequent to initial certification, and is adequately prepared to serve as a fieldwork educator?**  **Yes**   **No**

**2. The fieldwork agency must be in compliance with standards by external review bodies. Please identify external review agencies involved with this fieldwork setting and year of accreditation: (Double Click on boxes to check)**

JCAHO  Dept of Health Year of most recent review: 2015

CARF  Dept of Mental Health Other (specify)

**Summary of Outcomes of OT department review:** Not available

**3. Describe the fieldwork site agency stated mission or purpose.** *ACOTE Standards B.10.1, B.10.2, B.10.3, B.10.4, B.10.14, B.10.15*

Vanderbilt University is a center for scholarly research, informed and creative teaching, and service to the community and society at large. Vanderbilt will uphold the highest standards and be a leader in the

* quest for new knowledge through scholarship,
* dissemination of knowledge through teaching and outreach,
* creative experimentation of ideas and concepts.

In pursuit of these goals, Vanderbilt values most highly

* intellectual freedom that supports open inquiry,
* equality, compassion, and excellence in all endeavors.

## Credo

## We provide excellence in healthcare, research and education. We treat others as we wish to be treated. We continuously evaluate and improve our performance.

## Credo Behaviors

## I make those I serve my highest priority, I respect privacy and confidentiality, I communicate effectively, I conduct myself professionally, I have a sense of ownership and I am committed to my colleagues.

**4. A. INTEGRATION OF CURRICULUM THEMES (ACADEMIC PREPARATION)**

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| Please identify the *extent of opportunities* that students will have to incorporate the following themes in occupational therapy practice during the fieldwork experience | 1 = No opportunity  2 = Limited opportunities  3 = Some opportunities  4 = Many opportunities (with most clients)  5 = Consistent opportunities (for all clients) | | | | |
| 1 | 2 | 3 | 4 | 5 |
| A. **CLINICAL EXCELLENCE** |  |  |  | X |  |
| **B. SCHOLARSHIP** |  | X |  |  |  |
| **C. LEADERSHIP** |  |  | X |  |  |
| **D. SERVICE** |  |  | X |  |  |

**Please check all that apply (below) to identify “supports” to practicing curricular themes above: (Double Click on boxes to check)**

**Supports for clinical excellence:**

Students are encouraged to enable the client to participate in meaningful and purposeful occupations through best practice

Students are encouraged to implement clinical reasoning, utilization of evidence, currency in practice, clinical skills and client-centeredness

Other: (please describe)

**Supports for scholarship:**

Professional development through scholarship is valued by the fieldwork facility and practitioners who serve as role models

The facility’s environment promotes professional development through scholarship

Time is allotted for activities that promote scholarship

Other: (please describe)

**Supports for service:**

Employees/students are encouraged to be involved in service to strengthen community

Students are encouraged to be advocates for the clients served

Other: (please describe)

**Supports for leadership:**

Students are encouraged to collaborate with other disciplines

Students are encouraged to understand clients of different cultures as this is a leadership imperative

Other: (please describe)

**4. B. Describe how psychosocial factors influence engagement in OT services? (Double Click on boxes to check)**

Discouraged or depressed may not want to participate.  Encouragement/attention from therapist prompts greater participation

Depressed may try to withdraw from activities/staff/treatment  OT is hopeful the patient may exhibit good effort and energy.

Positive feelings contribute to greater compliance.

Other (please explain)

**4. C. Describe how you address client’s community based needs in your setting? (Double Click on boxes to check)**

Refer to social worker/case manager when appropriate

Provide resources/catalogs/written information for needed equipment, supplies as appropriate

Provide names/written materials for community support groups as appropriate

Refer to appropriate facility community groups when needed

Instruct client in finding appropriate resources

Provide referral to other community services as needed

Other (please describe)

**5. Please describe the FW Program & how students fit into the program**. **(Double Click on boxes to check)** *ACOTE Standards B10.2, B.10.3, B.10.5, B.10.7, B.10.13, B.10.19, B.10.20, b.10.21*

Fieldwork Program has been in place many years with multiple schools and therapy levels (OT and OTA)

Fieldwork Program is relatively new and still evolving – currently takes students from OT or OTA schools.

Fieldwork Program just took first fieldwork student from OT or OTA school.

Students provide learning opportunity to staff therapists to implement supervisory relationships and skills.

Students provide a link to various educational institutions to keep up with changes/developments in the field.

Providing fieldwork experiences is an obligation and responsibility for current practitioners.

Providing fieldwork experiences assists OT/OTA practitioners with continuing education credits.

Fieldwork students can provide updates in the literature for evidence based practice that is helpful to the facility/practitioners.

Fieldwork students can provide more one-on-one time with clients due to lower caseloads and the learning environment.

Fieldwork students are generally helpful to the overall operation of the facility once oriented and adjusted to population.

Supervision of students is expected of practitioners.

Supervision of students is rotated among practitioners on a regular basis.

Students are not accepted unless a practitioner indicates interest/willingness to take a student.

Other (Please Explain)

1. **Describe the training provided for OT staff for effective supervision of students (check all that apply).**  **(Double Click on boxes to check)** *ACOTE Standards B.7.10, B.10.1, B.10.3, B.10.12,B.10.13, B.10.17, B.10.18, B.10.19, B.10.20, B.10.21*

Supervisory models

Training on use of FW assessment tools (such as the AOTA Fieldwork Performance Evaluation - FWPE, Student Evaluation of Fieldwork Experience–SEFWE, and the Fieldwork Experience Assessment Tool–FEAT)

Clinical reasoning Discussions and how to teach clinical reasoning to students

Reflective practice

Comments:

1. **Please check off any training or resources that fieldwork educators at your site have available to support their role in supervision of students (e.g., print resources, continuing ed. coursework, online materials, workshops, etc.) (Double Click on boxes to check)**

Site Specific Student objectives (**please attach**)  Facility’s Student manual

Training in supervision process (agency in-services) Release time and/or reimbursement for continuing education

AOTA Certificate in Fieldwork Education Program Mentoring opportunities (e.g., in 1:1 or Group Format)

Training or in-service provided by GOTEC, Regional, State or individual Academic Programs

Use of online resources such as: AOTA (http://www.aota.org/Educate/EdRes/Fieldwork/Supervisor.aspx) GOTEC, Regional, State Associations, or individual Academic Programs

**Supervision Process (Double Click on boxes to check)**

What is the **nature** and frequency of supervision meetings: Formal Informal **Frequency**: daily weekly other What is the model of supervision utilized at your site:

1:1 Supervision Model Several Students: 1Therapist (Collaborative model)  Several Therapists: 1 student

**Supervisory Methods to promote reflective practice:**

Journaling Processing verbally Student Self Assessment/Self Appraisal (log/form)

Written activity analysis  Probing questions  Other: Interdisciplinary group supervision meetings

**Describe record keeping of supervision sessions:**

Co-signed documentation of daily/weekly supervision  All informal/formal notes maintained by FW Educator

Records kept when student not meeting expectations

Other:

**8. Please describe the process for record keeping supervisory sessions with a student, and the student orientation process to the agency, OT services and the fieldwork experience.** **(Double Click on boxes to check)** *ACOTE Standards B.7.10, B.10.1, B.10.3, B.10.12, B.10.13, B.10.17, B.10.18, B.10.19, B.10.20, B.10.21*

Meet with student to review policies, procedures & forms during first week assigned to facility.

Introduce student to staff and give tour of facility.

Provide Student Fieldwork Manual of assignments, policies, procedures etc. for the facility.

Send student to employee orientation, all or parts depending on relevance or as required by facility.

Review Fieldwork Educator’s case load to help student understand populations and interventions being implemented.

Meet with student at designated time every week to review clients, therapeutic interventions and other questions or concerns.

Meet with student at various non-scheduled times to review clients, therapeutic interventions and other questions/concerns.

Wait for student to initiate request to meet with fieldwork educator.

Supervisory sessions have topic planned for each meeting with student.

Supervisory sessions do not have topic planned but depend on student’s questions/concerns.

Supervisory sessions address concerns about student performance with possible methods to change/enhance performance.

Sessions with student are documented by fieldwork educator.

Sessions with student are documented by student.

Sessions with students are not documented.

Sessions with student are documented if problems with performance arise.

Other:

**9. Describe funding and reimbursement sources and their impact on student supervision. (Double Click on boxes to check)**  *ACOTE Standards B.10.3, B.10.5, B.10.7, B, 10.14, B.10.17, B.10.19*

Facility receives funding through Medicare.

Facility receives funding through Medicaid.

Facility receives funding through private insurance/private pay.

Facility provides charity care.

Facility receives funding through other sources – grants, tax allocations, etc.

**Impact on Student Supervision**:

Funding source does not affect OT/OTA student supervision.

Funding source restricts some activities for OT/OTA students. (Circle which group of students affected)

Funding source prohibits activities provided by OT/OTA students. (Circle which group of students affected)

Funding source requires fieldwork educator to be on premises to provide supervision of OT/OTA students.

Funding source requires fieldwork educator to have line-of-sight supervision of OT/OTA students.

Other (Please Explain)

**10.** **Please include a copy of the FW student objectives, weekly expectations for the Level II FW placement. Please attach to this form or mail to the Academic Fieldwork Coordinator.**

Please see out rehab services website for objectives.

**Occupational Therapy Staff Profile**

1. Lynette O’Brien, OTR/L graduated from Indiana University with 22 years of experience

2. Katie Crouch, MS, OTR/L graduated from Gannon University with 5 years of experience

3. Brittany Work, OTD, OTR/L graduated from Belmont University with 7 years of experience

4. Shane Wood, MS, OTR/L graduated from Belmont University with 14 years of experience

5. Buffy Hyman OTR/L graduated from TWU with 21 years of experience

6. Scott McLaurin, OT/L University of AL with 21 years of experience

7. Caleb Templeton MS, OTR/L NSCC (COTA) & Belmont (OT) with 10 years of experience (5.5 as a COTA)

8. Cari Safford, OTR/L graduated from TN State University with 14 years of experience

9. Taylor Campbell MS OTR/L graduated from LSU with 1 year of experience

10. Julia Jones MS, OTR/L graduated from Eastern KY University with 11 years of experience

11. Brooke Gentry, MS, OTR/L graduated from Milligan University with 5 years of experience

12. Jim Lassiter, OT/L graduated from TN State University with 21 years of experience

13. Paige Fusilier graduated from University of Texas Medical Branch with 6 years of experience

14. Sarah Brodie MS, OTR/L graduated from Washington University in St. Louis with < 1 year experience

15. Holly Thomas, MS, OTR/L graduated from Winston-Salem University with 3.5 years of experience

16. Kelsey Bigham MS, OTR/L graduated from Washington University in St. Louis with 2 years of experience

17. Ashley Day MS, OTR/L graduated from University of St. Augustine with 1 year of experience

18. Domenic Bruzzese, OTD, MA graduated from University of S. California with 4 years of experience

19. Sally Lindsey COTA/L graduated from Nashville State Tech College with 29 years of experience 20. Carrie Natte COTA/L graduated from NSCC with 3 years of experience

21. Leslie McCabe COTA/L graduated from St. Louis Community College with 8 years of experience

22. Jill Stewart COTA/L graduated from NSCC with 3 years of experience

23. Amanti Allman COTA/L graduated from Brown Mackie College with < 1 year of experience

24. Cindy Montalbo COTA/L graduated from NSCC with 3 years of experience

25. Elise Huehner COTA/L graduated from Manchester Community College with 4 years of experience

26. Cody Murphy, MS, OTR/L graduated from Belmont University with < 1 year of experience