

STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE)

Purpose:

This evaluation serves as a tool for fieldwork sites, academic programs, and students. The main objectives of this evaluation are to:

- Enable the Level II fieldwork student who is completing a placement at the site to evaluate and provide feedback to the fieldwork educator[s] and fieldwork setting
- Enable academic programs, fieldwork sites, and fieldwork educators to benefit from student feedback in order to develop and refine their Level II fieldwork programs
- Provide objective information to students who are selecting sites for future Level II fieldwork

This form is designed to offer each program the opportunity to gather meaningful and useful information. Programs may adapt this form to suit their needs.

Instructions to the Student:

Complete the SEFWE before your final meeting with your fieldwork educator(s).
Make a copy of the form for yourself. This form gets submitted to your fieldwork educator during or after you review your final fieldwork performance evaluation (FWPE). The SEFWE is signed by you and the fieldwork educator(s).

Instructions to the Fieldwork Educator(s):

Review the SEFWE with the student after the final Fieldwork Performance Evaluation (FWPE) has been reviewed and signed.

The SEFWE is signed by both the fieldwork educator(s) and the student.

Return both the FWPE and SEFWE promptly upon completion of the fieldwork to the academic fieldwork coordinator.

STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE

Fieldwork Site: _____

Address: _____

Type of Fieldwork: _____

Placement Dates: from _____ to _____

Order of Placement: [] First [] Second [] Third [] Fourth

Student work schedule:

Hours required: _____ per week

Weekends required Evenings required

Flex/Alternate Schedules Describe: _____

Identify Access to Public Transportation: _____

Please write your e-mail address here if you don't mind future students contacting you to ask you about your experience at this site: _____

We have mutually shared and clarified this Student Evaluation of the Fieldwork

Experience report on _____
(date)

Student's Signature

FW Educator's Signature

Student's Name (Please Print)

FW Educator's Name and credentials (Please Print)

FW Educator's years of experience _____

ORIENTATION—WEEK 1

Indicate the adequacy of the orientation by checking “Yes” (Y) or “Needs Improvement” (I).

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

CLIENT PROFILE

Check age groups worked with

List most commonly seen occupational performance issues in this setting

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

| Occupational Performance Issues |
|---------------------------------|
| |
| |
| |
| |
| |
| |
| |

Describe the typical population: _____

OCCUPATIONAL THERAPY PROCESS

I. EVALUATION

| List assessment tools used | Observed | Performed |
|----------------------------|----------|-----------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

II. INTERVENTION

List major therapeutic interventions frequently used and indicate whether each was provided as individual, group, or co-treatment, or as a consultation. List other professionals involved.

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

| | | | | |
|---|--|--|--|--|
| Education: provides knowledge & enhances understanding about occupation, health and well-being to client to develop helpful behaviors, habits, routines | | | | |
| | | | | |
| | | | | |
| Training: develops concrete skills for specific goal attainment. Targets client performance | | | | |
| | | | | |
| | | | | |
| Advocacy: promotes occupational justice and empowers clients | | | | |
| | | | | |
| | | | | |

Identify theory(ies) that guided intervention: _____

III. OUTCOMES

Identify the types of outcomes measured as a result of OT intervention provided:

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

**OTPF-III terminology

ASPECTS OF THE ENVIRONMENT

| | Yes | No |
|--|-----|----|
| The current Practice Framework was integrated into practice | | |
| Evidence-based practice was integrated into OT intervention | | |
| There were opportunities for OT/OTA collaboration | | |
| There were opportunities to collaborate with other professionals | | |
| There were opportunities to assist in the supervision of others— | | |

| | | |
|---|--|--|
| specify: | | |
| There were opportunities to interact with other students | | |
| There were opportunities to expand knowledge of community resources | | |
| Student work area/supplies/equipment were adequate | | |

Additional educational opportunities provided with comments (specify): _____

DOCUMENTATION AND CASE LOAD

Documentation Format:

- Narrative SOAP Checklist Other: _____
Hand-written documentation Electronic

If electronic, name format & program: _____

Time frame & frequency of documentation: _____

Ending student caseload expectation: _____ # of clients per week or day

Ending student productivity expectation: _____ % per day (direct care)

SUPERVISION

What was the primary model of supervision used? (check one)

- one fieldwork educator : one student
 one fieldwork educator : group of students
 two fieldwork educators : one student
 one fieldwork educator : two students
 distant supervision (primarily off-site)
 three or more fieldwork educators : one student (count person as fieldwork educator if supervision occurred at least weekly)

Frequency of meetings/types of meetings with fieldwork educator (value/frequency):

General comments on supervision: _____

SUMMARY of FIELDWORK EXPERIENCE

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

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

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

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? _____

INSTRUCTIONS

One form must be completed for each fieldwork educator who provided supervision. You can detach this page and make more copies as needed.

Check the box that best describes your opinion of the fieldwork educator's efforts in each area

FIELDWORK EDUCATOR NAME: _____

FIELDWORK EDUCATOR YEARS OF EXPERIENCE: _____

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

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

Comments: _____

