

**Rocky Mountain University of Health Professions
Master of Occupational Therapy Program
Fieldwork Level I Educator Attestation and Fieldwork Objectives**

Fieldwork Site Name: _____

Per ACOTE Standards C.1.1., C.1.3., C.1.7., C.1.8., C.1.9., C.1.10., and C.1.11. The Master of Occupational Therapy (MOT) Program ensures that Level I Fieldwork Educators (FWEs) are appropriately qualified; that communication between the Fieldwork Educator and the Academic Fieldwork Coordinator (AFWC) is timely, consistent, and thorough; that Level I Fieldwork experiences and expectations are comparable across student placements; and that established fieldwork objectives are mutually agreed upon by the AFWC and the FWE prior to the start of the fieldwork experience. The FWE affirms readiness to assume the responsibilities of a Level I Fieldwork Educator for Rocky Mountain University of Health Professions (RMU) MOT student(s).

I attest to the following (initial):

_____ I have sufficient qualifications and affirm my ability to supervise a level I student, and I am currently a licensed professional in the state where the FW level I experience will occur.

_____ I am willing and able to assist the fieldwork student in achieving the objectives listed below.

_____ I have read the RMU MOT program Level I FW objectives and have been given the opportunity to collaborate with AFWC to implement mutually agreed upon FW site-specific objectives.

_____ I have received, read, and understand the contents of RMU's FW manual for the MOT Program.

_____ I acknowledge that I am aware of and have access to RMU's Fieldwork Resource Page. I understand my responsibility to review and utilize these materials to support a Level I Fieldwork experience.

_____ I am prepared to provide supervision of supervisor to student ratio:
(not to exceed 1 supervisor: 7 student ratio)

Fieldwork Objectives: Upon successful completion of this fieldwork experience, the student will be able to:

1. **Demonstrate Foundational Knowledge:** Develop an understanding of the basic tenets, theoretical foundations, and scope of occupational therapy practice as it relates to the psychosocial setting.
2. **Apply Professional Skills and Critical Thinking:** Demonstrate effective written, verbal, and nonverbal communication when interacting with clients, caregivers, occupational therapy practitioners, and other professionals, adapting communication as appropriate to the individual, context, and situation.



3. **Collaborate in Context:** Recognize the importance of teamwork with OT practitioners, healthcare providers, and educational professionals to support client outcomes.
4. **Understand the OT Process:** Describe and participate in selected aspects of screening, evaluation, goal setting, intervention planning and implementation, re-evaluation, and discharge within the practice settings.
5. **Exhibit Professional Behaviors:** Demonstrate ethical practice, cultural humility, accountability, respectful treatment of others, and professional work habits such as time management and maintenance of practice environments.
6. **Integrate Client and Contextual Factors:** Identify psychosocial, environmental, contextual, and personal factors that may influence a client's occupational participation and performance.
7. **Apply Clinical Reasoning:** Develop beginning clinical reasoning skills by observing client performance, identifying occupational strengths and barriers, and discussing the rationale for selected evaluations, goals, and intervention approaches with the fieldwork educator.
8. **Engage in Reflective Practice and Lifelong Learning:** Engage in reflective practice by identifying personal strengths, areas for continued development, and questions generated through the fieldwork experience, and use feedback and self-reflection to establish goals for future professional learning.

FW Level I Site-Specific Objectives (optional)

Please list or attach any site-specific objectives that your facility uses/requires.

- 1.
- 2.
- 3.

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

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

Fieldwork Educator Printed Name: _____

Fieldwork Educator Signature: _____ Date: _____

Academic Fieldwork Coordinator Signature: _____