## 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 supervisor 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;
- Ensure that all aspects of the fieldwork program reflect the sequence, depth, focus, and scope of content of the curriculum design;
- Provide objective information to students who are selecting sites for future Level II fieldwork; and
- Provide a means of evaluation to ensure that fieldwork is performed in settings that provide educational experiences applicable to the academic program.

This form is designed to offer each program the opportunity to gather meaningful and useful information. Sections outlined with thick black double borders are designed to be customized by your program as needed. Pages involving evaluation of individual fieldwork educators have been positioned at the end of the form to allow academic programs to easily remove these pages before making them available for student review, if they choose to do so.

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#### **Instructions to the Student:**

Complete this STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE) form before your final meeting with your fieldwork supervisor(s). It is imperative that you review the form with your supervisor and that both parties sign on page 1. Copy the form so that a copy remains at the site and a copy is forwarded to your Academic Fieldwork Coordinator at your educational program. This information may be reviewed by future students as well. The evaluation of the student (FWPE) should be reviewed first, followed by the student's evaluation of the fieldwork experience (SEFWE), allowing the student to be honest and constructive.

Fieldwork Site	Site Code
Address	
Placement Dates: from	to
Order of Placement: [ ] First [ ] Seco	ond [ ] Third [ ] Fourth
Living Accommodations: (include type, cos	st, location, condition)
Public transportation in the area:	
	u don't mind future students contacting you to
adit you about your experience at this old.	
We have mutually shared and clarified tl Experience report.	nis Student Evaluation of the Fieldwork
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**

Indicate your view of the orientation by *checking* "Satisfactory" (S) or "Needs Improvement" (I) regarding the three factors of adequacy, organization, and timeliness.

	TOPIC	Adequate Organized		Timely		NA		
		S	I	S		S	I	
1.	Site-specific fieldwork objectives							
2.	Student supervision process							
3.	Requirements/assignments for students							
4.	Student schedule (daily/weekly/monthly)							
5.	Staff introductions							
6.	Overview of physical facilities							
7.	Agency/Department mission							
8.	Overview of organizational structure							
9.	Services provided by the agency							
10.	Agency/Department policies and procedures							
11.	Role of other team members							
12.	Documentation procedures							
13.	Safety and emergency procedures							
14.	Confidentiality/HIPAA							
15.	OSHA—Standard precautions							
16.	Community resources for service recipients							
17.	Department model of practice							
18.	Role of occupational therapy services							
19.	Methods for evaluating OT services		_			_		
20.	Other							

Comments or suggestions regarding your orientation to this fieldwork placement:						

## **CASELOAD**

List approximate number of each age category in your caseload.

Age	Number
0–3 years old	
3–5 years old	
6-12 years old	
13–21 years old	
22-65 years old	
> 65 years old	

List approximate number of each primary condition/problem/diagnosis in your caseload

Condition/Problem	Number

### **OCCUPATIONAL THERAPY PROCESS**

Indicate the approximate number of screenings/evaluations you did; also indicate their value to your learning experience by *circling* the appropriate number with #1 being least valuable and #5 being the most valuable.

	REQU Yes	JIRED No	HOW MANY	Е	DUC V	ATI ALU		\L
Client/patient screening				1	2	3	4	5
Client/patient evaluations     (Use specific names of evaluations)								
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
				1	2	3	4	5
3. Written treatment/care plans				1	2	3	4	5
4. Discharge summary				1	2	3	4	5

List major therapeutic interventions frequently used and indicate whether it was provided in group, individually, Co-Treatment, or consultation. List other professionals involved.

Therapeutic Interventions	Individual	Group	Co-Tx	Consultation
Occupation-based activity, i.e., play, shopping, ADL, IADL, work, school activities, etc. (within client's own context with his or her goals)				
1.				
2.				
3.				
4.				
Purposeful activity (therapeutic context leading to occupation)				
1.				
2.				
3.				
4.				_

Preparatory methods, i.e., sensory, PAMs, splinting, exercise, etc. (preparation for occupation-based activity)		
1.		
2.		
3.		
4.		

## THEORY—FRAMES OF REFERENCE—MODELS OF PRACTICE

Indicate frequency of theory/frames of reference used

	Never	Rarely	Occasionally	Frequently
Model of Human Occupation				
Occupational Adaptation				
Ecology of Human Performance				
Person–Environment–Occupation Model				
Biomechanical Frame of Reference				
Rehabilitation Frame of Reference				
Neurodevelopmental Theory				
Sensory Integration				
Behaviorism				
Cognitive Theory				
Cognitive Disability Frame of Reference				
Motor Learning Frame of Reference				
Other (list)				
	_	_		

## FIELDWORK ASSIGNMENTS

List the types of assignments required of you at this placement (check all that apply), and indicate their educational value (1 = not valuable ------ 5 = very valuable)

Case study applying the Practice Framework	1	2	3	4	5	N/A
Evidence-based practice presentation:	1	2	3	4	5	N/A
Topic:						
Revision of site-specific fieldwork objectives	1	2	3	4	5	N/A
Program development	1	2	3	4	5	N/A
Topic:						
In-service/presentation	1	2	3	4	5	N/A
Topic:						
Research	1	2	3	4	5	N/A
Topic:						
Other (list)		1	2	3	4	5

#### 1 = Rarely2 = Occasionally ASPECTS OF THE ENVIRONMENT 3 = Frequently 4 = Consistently 1 2 4 Staff and administration demonstrated cultural sensitivity The Practice Framework was integrated into practice Student work area/supplies/equipment were adequate Opportunities to collaborate with and/or supervise OTs, OTAs, and/or aides Opportunities to network with other professionals Opportunities to interact with other OT students Opportunities to interact with students from other disciplines Staff used a team approach to care Opportunities to observe role modeling of therapeutic relationships Opportunities to expand knowledge of community resources Opportunities to participate in research Additional educational opportunities (specify): How would you describe the pace of this setting? (circle one) Slow Med Fast Types of documentation used in this setting: Ending student caseload expectation: # of clients per week or day % per day (direct care) Ending student productivity expectation:

#### **SUPERVISION**

What was the primary model of supervision used? (check one)	
one supervisor : one student	
one supervisor : group of students	
two supervisors : one student	
one supervisor : two students	
distant supervision (primarily off-site)	
three or more supervisors : one student (count person as supervisor if supervision occurred at least	
weekly)	

List fieldwork educators who participated in your learning experience.

Name	Credentials	Frequency	Individual	Group
1.				
2.				
3.				
4.				
5.				

### **ACADEMIC PREPARATION**

Rate the relevance and adequacy of your academic coursework relative to the needs of THIS fieldwork placement, *circling* the appropriate number. (Note: may attach own course number)

	Adequacy for Placement				Relevance for Placement					
	Low			High		Low				High
Anatomy and Kinesiology	1	2	3	4	5	1	2	3	4	5
Neurodevelopment	1	2	3	4	5	1	2	3	4	5
Human development	1	2	3	4	5	1	2	3	4	5
Evaluation	1	2	3	4	5	1	2	3	4	5
Intervention planning	1	2	3	4	5	1	2	3	4	5
Interventions (individual, group, activities, methods)	1	2	3	4	5	1	2	3	4	5
Theory	1	2	3	4	5	1	2	3	4	5
Documentation skills	1	2	3	4	5	1	2	3	4	5
Leadership	1	2	3	4	5	1	2	3	4	5
Professional behavior and communication	1	2	3	4	5	1	2	3	4	5
Therapeutic use of self	1	2	3	4	5	1	2	3	4	5
Level I fieldwork	1	2	3	4	5	1	2	3	4	5
Program development	1	2	3	4	5	1	2	3	4	5

What were the strongest aspects of your academic program relevant to preparing you for THIS Level II fieldwork experience? Indicate your top 5.

☐ Informatics ☐ Pathology ☐ Env. Competence ☐ Interventions ☐ Social Roles	Occ. as Life Org Neuro Research courses Evaluations History	A & K Administration Prog design/eva Adapting Env Occupational Sc	Ī	Theory Consu	, ilt/collab n comp.		Peds	el I FW s electives or adult elect. munity elect.		
What changes would fieldwork experience?	you recommend in your	academic program r	elative	to the n	eeds of	THIS I	Level II			
SUMMARY			1 = Strongly disagree 2 = Disagree 3 = No Opinion 4 = Agree 5 = Strongly agree							
Expectations of field	work experience were cl	early defined						ı		
Expectations were c	hallenging but not overw	helming						ı		
Experiences support	ted student's professiona	al development						ı		
Experiences matche	ed student's expectations	3						ı		

What particular qualities or personal performance skills do you feel that a student should 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.

Indicate the number that seems descriptive of each fieldwork educator. Please make a copy of this page for each individual.  FIELDWORK EDUCATOR NAME:		1 = Strongly Disagree 2 = Disagree 3 = No opinion 4 = Agree 5 = Strongly agree					
FIELDWORK EDUCATOR YEARS OF EXPERIENCE:	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							
Frequency of meetings/types of meetings with supervisor (value/frequency):							
General comments on supervision:							