It is expected that OT Level II Fieldwork students will comply with the following:

I. FUNDAMENTALS OF PRACTICE

1. **Adhere to ethics:** Consistently adhere to the American Occupational Therapy Association (AOTA) Code of Ethics and Ethics Standards (2010) and CO Mental Health Institute-Fort Logan’s (CMHI-FL) policies and procedures, and when relevant, those related to human subject research.
   - Demonstrate work behaviors that reflect an understanding of professional standards and code of ethics appropriate to the practice environment;
   - Consistently maintain appropriate boundaries, with clients, their significant others and care extenders, colleagues, and customers;
   - Observe federal, state, and facility regulations relating to confidentiality in a constant and reliable manner;
   - Recognize and appreciate that applying professional standards and code of ethics are an integral component of being a professional as demonstrated by actions during Fieldwork experience;
   - Identify and address ethical concerns in the context of clinical supervision, discussing if-when-how ethical standards apply to situations, and resolve per established procedures.

2. **Adhere to safety regulations:** Consistently adhere to safety regulations. Anticipate potentially hazardous situations and take steps to prevent accidents.
   - Demonstrate an awareness and understanding of client observation levels as noted through communication with Fieldwork Educator and clinical staff, milieu management, and on / off unit procedures for therapeutic client interventions;
   - Understand and employ information related to safety concerns from chart reviews and other appropriate sources;
   - Attend to changes in client’s status per CMHI-FL’s practices; initiate asking thoughtful questions when in doubt;
   - Consistently maintain an awareness of and adhere to all pertinent hospital safety policies and procedures, which include bystander CPR response, fire and other potential disaster responses, maintenance and use of “sharps,” and environmental safety concerns.

3. **Use judgment in safety:** Use sound judgment in regard to safety of self and others during all fieldwork-related activities.
   - Be aware of student role during restraint and seclusions on/off the unit as demonstrated through information gathering and training, and appropriate actions prior to, during, and after event(s);
   - Be aware of and comply with student role during on / off unit therapeutic activities, milieu activities, and during hospital-wide events for clients and/or staff;
II. BASICS TENETS

1. Clearly and confidently articulate the values and beliefs of the occupational therapy profession to clients, families, significant others, colleagues, service providers, and the public.
   - Demonstrate the ability to effectively articulate and translate the importance, values, and beliefs of occupational therapy in the client’s overall treatment plan at a level that the client, family, significant others, colleagues, service providers, and/or the public are able to understand;
   - Select activities that reflect an understanding of the client’s interests and occupational values.

2. Clearly, confidently, and accurately articulate the value of occupation as a method and desired outcome of occupational therapy to clients, families, significant others, colleagues, service providers, and/or the public.
   - Articulate to clients and staff the rationale behind a selected activity and/or occupation;
   - Demonstrate the ability to effectively communicate, to a variety of audiences, the value of occupation as a primary method in the person’s overall intervention plan.

3. Clearly, confidently, and accurately communicate the roles of the Occupational Therapy Practitioner (occupational therapist and occupational therapy assistant) to clients, families, significant others, colleagues, service providers, and the public.
   - Convey the delineation of roles of an OT and of an OTA in the provision of skilled OT services within CMHI-FL’s service delivery model(s), to consumers, their significant others and care extenders, and various treatment / service providers.

4. Collaborate with client, family, and significant others throughout the occupational therapy process.
   - Collaboratively discuss and set goals with clients in the context of both individual and group interactions that reflect a logical sequence of goal attainment;
   - Demonstrate recognition of the importance of involving the client / family / team members / significant others in goal setting and intervention process by applying collaborative methods;
   - Follow through with plans made with the client / family / significant others by ordering or providing equipment and/or making arrangements for outpatient therapy or a home program, per CMHI-FL’s protocols.
III. EVALUATION AND SCREENING

1. **Articulate a clear and logical rationale** for the evaluation process.
   - Demonstrate the ability to effectively articulate a logical rationale for the OT evaluation process to the client / family / significant other / staff;
   - Clearly communicate the rationale for occupational therapy evaluation (including occupational profile, analysis of occupational performance), and how those outcomes impact the subsequent intervention(s) (intervention plan, intervention implementation, and intervention review), and outcome(s) assessment;
   - Demonstrate an understanding of the Occupational Therapy Intervention Process Model (OTIPM) as used to guide sound judgment within the evaluation process;
   - Apply the Occupational Therapy Practice Framework, Domain and Process (OTPF) to the evaluation process, as evidenced by the sequencing of events within the evaluation process;
   - Understand and utilize the Cognitive Disabilities Model, a cognitive behavioral approach, Dialectical Behavioral Therapy, the Model of Human Occupation, the Recovery Model (Psychiatric Rehabilitation), and other theories and/or models of practice as deemed appropriate for the client(s) to assess client occupational performance during therapeutic groups and milieu activities.

2. **Select relevant screening and assessment methods** while considering such factors as client’s priorities, context(s), theories, and evidence-based practice.
   - Understand the use of a specific assessment tool in relationship to the client’s identified condition, including his/her occupational profile, initial treatment goals, and proposed discharge plan, as articulated to the Fieldwork Educator and clinical staff.

3. **Determine client’s occupational profile and performance** through appropriate assessment methods.
   - Demonstrate familiarity with and comfort when interviewing clients as demonstrated by preparedness, confident demeanor, and efficiency of obtaining information;
   - Demonstrate an effective therapeutic use of self concepts when engaged in client-centered assessment processes.

4. **Assess client factors and context(s) that support or hinder occupational performance.**
   - Effectively and accurately use evaluative procedures that address occupational performance, which may include: skilled observations during initial / ongoing occupational profile information gathering, and observations during (formal) task groups and (informal) milieu interactions with peers and staff;
   - Using standardized evaluation tools (e.g., the Allen Battery including (L)ACLs, ADMs, and CPT; Adolescent/Adult Sensory Profile; Independent Living Scales (ILS); motor and praxis skills performance skills assessments), extract aspects that sustain or obstruct occupational performance.

5. **Obtain sufficient and necessary information** from relevant resources such as client, families, significant others, service providers, and records prior to and during the evaluation process.
   - Be aware of and accept responsibility for the importance of thorough data gathering as demonstrated by seeking data collection from a variety of available and reliable resources;
Demonstrate an understanding of psychiatric diagnosis and its impact on occupational performance as evidence during the data collection process;

Select and filter relevant and important information from all data collected.

6. **Administer standardized assessments** in a uniform manner to ensure findings are valid and reliable.
   - Be aware of, consistently use, and accept responsibility for the importance of an accurate, thorough assessment, per standardization of the tool;
   - Recognize, articulate need for, and accurately document use of non-standardized evaluation methods;
   - Articulate the value of selected standardized and/or commonly used assessment tools and describe the relationship between methodology and data gathering during discussions with the Fieldwork Educator and other clinical CMHI-FL staff.

7. **Adjust / modify the assessment procedures** based on client’s needs, behaviors, and culture.
   - Adapt the evaluation and/or assessment process according to client’s individual needs as indicated by the client’s actions, the milieu, the standardized evaluation tool(s), and/or other factors impacting the assessment procedure.

8. **Interpret assessment and evaluation results** to determine the client’s occupational performance strengths and challenges.
   - Objectively analyze and select pertinent data from assessment to develop an accurate profile of the client’s strengths and weaknesses;
   - Interpret data objectively and according to standardized or non-standardized / accepted practice methods;
   - Accurately interpret data using guiding language and concepts from the OTIPM and the OTPF, along with accompanying model(s) of practice;
   - Use sound OT judgment and OT clinical reasoning (e.g., Mattingly and Fleming, 1994; Schell and Schell, 2008).

9. **Establish an accurate and appropriate plan** based on the evaluation results by integrating multiple factors such as client’s priorities, context(s), theories, and evidence-based practice.
   - Within a Recovery Model philosophy, use the OT evaluation process to contribute to determining what the client’s needs will be as he/she progresses to a lower or changed level of care;
   - Identify continued treatment needs and approaches (e.g., per OTIPM, OTPF), including caregiver education and compensatory strategies indicated for the client to be successfully discharged from the acute hospital setting;
   - Given the client’s occupational profile, areas of occupation of interest / necessity to the disposition plan, incorporate factors such as evidence-based practice, theoretical or models of practice assumptions, occupation-based practice concepts, and Recovery Model philosophies into a multidisciplinary treatment plan.

10. **Document the results of the evaluation process** that demonstrate objective measurements of client’s occupational performance.
    - Document results of the evaluation and re-evaluation (re/assessment) following Therapeutic Activities Department policies and procedures;
• Using OT clinical reasoning, evidence-based research, and Occupational Therapy Practice Framework: Domain and Process (OTPF) language, document and/or verbally articulate what the results of the evaluation indicate, along with future possible implications in occupational performance (functioning);
• Report verbally and/or in writing unusual or critical information gathered during the evaluation process to the appropriate staff members in a timely manner;
• Report performance data objectively, respectfully, using people-first language;
• Contribute to the discharge plan in a manner that reflects an understanding of functional level at the time of the client’s discharge and the available environmental supports in the anticipated discharge setting.

IV. INTERVENTION

1. **Articulate a clear and logical rationale** for the intervention process.
   • Use OT clinical reasoning, grounded in authentic occupational therapy (e.g., occupation-based) to support decision making when discussing the intervention plan with the supervisor / client / family / staff / significant others;
   • Communicate clearly and concisely, orally and in writing, via handwritten and electronic means;
   • Demonstrate an understanding of the Occupational Therapy Intervention Process Model (OTIPM) as used to guide sound judgment within the intervention processes;
   • Integrate Occupational Therapy Practice Framework: Domain and Process (OTPF) into the intervention process, as evidenced by the sequencing of events within the intervention planning / intervention / intervention review process;
   • Within a Recovery Model philosophy, vary language depending on audience, respectfully;
   • Demonstrate flexibility in exploring and using alternative methods for service delivery when standard or anticipated methods are ineffective (e.g., time, duration, and/or location of task group).

2. **Utilize evidence** from published research and relevant resources to make informed intervention decisions.
   • Use OT clinical reasoning backed by published research and/or relevant, credible resources to make informed intervention decisions;
   • Research and review (read and comprehend) assigned articles and other documents that support decision making before / during supervision times; these publications should reflect client characteristics, environment and context for service delivery, patterns of behavior, and other factors that impact the effective critical thinking and decision making process.

3. **Choose occupations** that motivate and challenge clients.
   • Use occupations and/or purposeful activities based on the appropriate theoretical model(s) that will be most effective in maximizing the client’s occupational performance and achieving established goals;
   • Use interventions that are “just right challenges” for the clients, that provide for mastery and success, and provide a client-centered learning opportunity;
• Use preparatory and purposeful activities that support occupation-based performance;
• Use goal-oriented occupations and/or activities that are meaningful to the client;
• Use effective therapeutic use of self when choosing which occupations will capture and sustain client(s)’ ability to engage in client-centered therapeutic interactions.

4. **Select relevant occupations** that facilitate meeting client’s established goals.
   • Choose activities that will be most effective in maximizing the client’s occupational performance and allow for ongoing assessment of the client’s functional capacity and readiness for discharge;
   • Decide on occupations and/or purposeful activities and/or preparatory activities that can be graded or modified as necessary to make meaning for the client within his/her identified goals.

5. **Implement intervention plans that are client-centered.**
   • Recognize the importance of client-centered practice and involvement of family / significant others and caregivers in the intervention process, as demonstrated by client satisfaction;
   • Use client-centered occupations and/or purposeful activities and/or preparatory activities, grading or modifying as necessary to make meaning for the client within his/her identified goals;
   • Use effective therapeutic use of self concepts when engaging in client-centered therapeutic interactions.

6. **Implement intervention plans that are occupation-based.**
   • Offer “areas of occupation” occupations (occupation-based activity, purposeful activity, preparatory methods) that reflect the client’s performance skills, patterns, and client factors, adjusting activity demands as indicated, within a “supportive” context and environment;
   • Recognize the value of and employ the most effective strategy(s) to achieve individual goals and maximize the client’s interest in the treatment program.

7. **Modify task approaches, occupations, contexts, and the environment** to maximize client performance.
   • Using a strength-based approach, demonstrate the ability to identify more than one appropriate strategy for a given problem area;
   • Identify when and how to modify and/or grade a task, the approach, the environment, therapeutic use of self concepts, and other adaptable features to maximize client’s “best ability to function;”
   • Appropriately revise and adjust selected occupations and/or activities to adapt to a change in the client’s condition or stated interest / perceived competence.

8. **Update, modify, or terminate the intervention plan** based upon careful monitoring of the client’s status.
   • Demonstrate effective critical thinking skills, OT clinical reasoning skills, and a model(s)of practice to identify steps to solve problems in client treatment and then (re) establish goals;
   • Select and synthesize available, relevant data when making decisions about treatment;
   • Grade, modify, and/or change activities or methods to achieve treatment goals;
• Use therapeutic use of self concepts to adjust therapeutic approaches within the established or changing intervention plan;
• Given the client’s occupational profile, areas of occupation of interest, and disposition plan, incorporate client factors, performance skills, performance patterns, and activity demands into the (perceived) context and environment, contributing to interventions and types of outcomes that combine to allow for “living life to its fullest” (e.g., adaptation, health and wellness, role competence).

9. Document client's response to services in a manner that demonstrates the efficacy of interventions.
   • Write progress notes to clearly indicate measurable, behavioral response(s) to treatment that were a result of skilled OT service delivery;
   • Use correct English grammar, spelling, non-pejorative language, facility approved abbreviations, and formatting that clearly and accurately communicates the client’s response to skilled OT services;
   • Follow facility format for documentation to assure reimbursement;
   • Discriminate between relevant and irrelevant material;
   • Accept responsibility for timely written documentation and initiate oral reports independently.

V. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES

1. Demonstrate through practice or discussion the ability to assign appropriate responsibilities to the occupational therapy assistant and occupational therapy aide.
   • Articulate an understanding of the role delineation between the various levels of professional and paraprofessional staff, including OTAs, mental health clinicians, and non-nursing staff;
   • Work collaboratively with Therapeutic Activities colleagues and interns, nursing staff, and interns from other disciplines to plan successful treatment and milieu management strategies.

2. Demonstrate through practice or discussion the ability to actively collaborate with the occupational therapy assistant.
   • Articulate an understanding of the role of the OTA in the behavioral health care setting in a manner that reflects a value and appreciation for the contribution of the OTA;
   • Use respectful, supportive, legally correct language when articulating OT / OTA partnership practices;
   • Devise ways to collaborate with the OTA to plan strategies based on accurate analyses of the activity demands and context of the intervention.

3. Demonstrate understanding of the costs and funding related to occupational therapy services at CMHI-FL.
   • Supervise the use of supplies in OT groups and 1:1 sessions, with fiduciary responsibility;
   • Monitor the use of Therapeutic Activities Department-funded unit supplies, reporting appropriate use and replenishment needs, possible misuses, along with proposing creative, funding-constrained, alternative ideas for supplying client-necessitated materials;
• Follow Therapeutic Activities department policy when requesting supplies from dietary services, housekeeping, facilities maintenance, grounds department, and the like.

4. **Accomplish organizational goals** by establishing priorities, developing strategies, and meeting deadlines.
   • Demonstrate flexibility in adjusting priorities to meet the established goals of the department;
   • Collaborate with the Fieldwork Educator in a proactive, positive, effective, and professional manner to incorporate CMHI-FL’s mission, values, and goals into the pragmatics of accomplishing the priorities of the role of the occupational therapist.

5. **Produce the volume of work** required in the expected time frame.
   • Organize client-centered treatment and non-direct treatment responsibilities in order to ensure that responsibilities are completed in a timely and professional manner;
   • Anticipate and plan ahead in order to calculate the amount of time needed to complete a task; as necessary, use occasions outside of the established Fieldwork experience for timely task completion, yet integrate a necessary balance into one’s own life interests and obligations;
   • Differentiate the importance of each assigned and/or self-chosen task in order to prioritize tasks so that they are completed in a timely and professional manner.

VI. **COMMUNICATION**

1. **Clearly and effectively communicate verbally and nonverbally** with clients, families, significant others, colleagues, service providers, and the public.
   • Develop and maintain professional boundaries and rapport with clients, families, and significant others to enhance the therapeutic relationship;
   • Use effective therapeutic use of self, ethics, the art of limit setting, and low-level interventions in a manner that reflects a respectful and humanistic approach.

2. **Produce clear and accurate documentation** according to site requirements.
   • Handwrite and type progress notes that are concise and reflect information on occupational performance;
   • Use professional, respectful language including people-first, OT Practice Framework, and language specific to (OT) models of practice, yet in a manner that is understood by the audience(s);
   • In a timely manner and per CMHI-FL’s protocol, report unusual and/or critical information.

3. **Compose written communication that is legible**, using proper spelling, punctuation, and grammar.
   • With ease and confidence, use written communication that is free of “text language,” discriminatory and/or offensive comments, and/or “street slang”
   • Use language, in both handwritten and typed formats, that is appropriate for medical / legal documentation in a professional, therapeutic, healthcare setting.
4. **Use language appropriate to the recipient** of the information, including but not limited to funding agencies and regulatory agencies.
   - Explain skilled OT service needs and recommendations for clients to varied audiences, using terminology that both supports OT’s domain and process, and a client-centered, Recovery Model philosophy; avoid pejorative jargon, threatening and/or insulting language, and ambiguous terminology;
   - Communicate in a concise and articulate manner;
   - Adhere to CMHI-FL’s policy regarding acceptable abbreviations.

**VII. PROFESSIONAL BEHAVIORS**

1. **Collaborate with supervisor(s)** to maximize the learning experience.
   - Accept responsibility for initiating professional learning experiences;
   - Be self-directed in determining learning strengths and challenges by advocating for educational needs;
   - Collaborate with Fieldwork Educator to design and structure optimal learning opportunities by providing feedback and suggestions on topics such as supervision, learning activities, and challenges.

2. **Take responsibility for attaining professional competence** by seeking out learning opportunities and interactions with supervisors(s) and others.
   - Self-advocate for personal and professional goals for the fieldwork experience by reflecting upon goal attainment needs and learning styles;
   - Recognizing that the world presents itself in multi-model styles, effectively adapt to these various styles, and use those experiences as a parallel process to clients’ teaching / learning needs;
   - Effectively use adult learning concepts to facilitate teaching / learning opportunities;
   - Independently seek and implement opportunities for improving skills.

3. **Respond constructively to feedback.**
   - Reflect upon feedback and make behavior adjustments in response to cues and direction from Fieldwork Educator, Therapeutic Activities colleagues, hospital staff, and the academic OT Program’s Academic Fieldwork Coordinator (AFWC);
   - Act in response to the dynamic nature of the learning context and opportunities within the environment, in a manner consistent with maintaining safety and reflective of fulfilling identified fieldwork education goals.

4. **Demonstrate consistent work** behaviors including initiative, preparedness, dependability, and work site maintenance.
   - Consistently maintain professional behaviors in the workplace. This includes, but is not limited to, being inventive and resourceful, being ready, being trustworthy and reliable, and assuming a professional demeanor;
   - Arrive on time to scheduled events, and consistently complete Fieldwork assignments and expectations on time, accurately;
• Dress in a professional manner that is consistent with CMHI-FL’s dress code, is respectful of the clients and staff, and is in a manner that is a positive representation of the Occupational Therapy profession.

5. **Demonstrate effective time management.**
   • Organize treatment and non-treatment responsibilities in order to ensure that responsibilities are completed in a timely and professional manner.

6. **Demonstrate positive interpersonal skills** including but not limited to cooperation, flexibility, tact, and empathy.
   • Consistently maintain professional behaviors in the workplace, including, but not limited to, professional appearance, showing respect for other professionals, possessing a positive, learning attitude, and presenting a professional and confident manner;
   • Develop and maintain a rapport with clients that enhances the therapeutic relationship and is compatible with the spirit of the Recovery Model and the profession of Occupational Therapy.

7. **Demonstrate respect for diversity** factors of others including but not limited to socio-cultural, socioeconomic, spiritual, and lifestyle choices.
   • Be respectful and open to diverse backgrounds and ideas in the treatment setting. Seek to understand the client’s perspective and context when collaborating in treatment;
   • Be aware of personal biases and judgments, and guard against using them in a non-professional manner. Be careful to not impose one’s own beliefs and values on clients, their care extenders, or CMHI-FL staff. Reflect on own assumptions to ensure an openness to others’ perspectives;
   • Access translation services as needed;
   • Support AOTA’s position on non-discrimination and inclusion, along with the legal intent and the spirit of CO Department of Human Service’s (CDHS) non-discrimination statement.