

# STUDENT EVALUATION OF THE FIELDWORK EXPERIENCE (SEFWE)

THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC.

## 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 (check one):     Level 2 Summer             Level 2 Fall

Living Accommodations (*include type, cost, location, condition*):

Public transportation in the area:

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.**

\_\_\_\_\_  
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	I	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:

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## 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.

	REQUIRED		HOW MANY	EDUCATIONAL VALUE				
	Yes	No		1	2	3	4	5
1. Client/patient screening				1	2	3	4	5
2. 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
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	

## ASPECTS OF THE ENVIRONMENT

1 = Rarely  
 2 = Occasionally  
 3 = Frequently  
 4 = Consistently

	1	2	3	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 ( <i>specify</i> ):				
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				
Ending student productivity expectation: _____ % per day (direct care)				

## 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.

<input type="checkbox"/> Informatics	<input type="checkbox"/> Occ. as Life Org	<input type="checkbox"/> A & K	<input type="checkbox"/> Foundations	<input type="checkbox"/> Level I FW
<input type="checkbox"/> Pathology	<input type="checkbox"/> Neuro	<input type="checkbox"/> Administration	<input type="checkbox"/> Theory	<input type="checkbox"/> Peds electives
<input type="checkbox"/> Env. Competence	<input type="checkbox"/> Research courses	<input type="checkbox"/> Prog design/eval	<input type="checkbox"/> Consult/collaborate	<input type="checkbox"/> Older adult elect.
<input type="checkbox"/> Interventions	<input type="checkbox"/> Evaluations	<input type="checkbox"/> Adapting Env	<input type="checkbox"/> Human comp.	<input type="checkbox"/> Community elect.
<input type="checkbox"/> Social Roles	<input type="checkbox"/> History	<input type="checkbox"/> Occupational Sci	<input type="checkbox"/> Other:	

What changes would you recommend in your academic program relative to the needs of **THIS** Level II fieldwork experience?

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## SUMMARY

	1 = Strongly disagree 2 = Disagree 3 = No Opinion 4 = Agree 5 = Strongly agree				
	1	2	3	4	5
Expectations of fieldwork experience were clearly defined					
Expectations were challenging but not overwhelming					
Experiences supported student's professional development					
Experiences matched student's expectations					

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

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What advice do you have for future students who wish to prepare for this placement?

- Study the following evaluations:

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- Study the following intervention methods:

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- Read up on the following in advance:

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Overall, what changes would you recommend in this Level II fieldwork experience?

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Please feel free to add any further comments, descriptions, or information concerning your fieldwork at this center.

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Indicate the number that seems descriptive of each fieldwork educator. Please make a copy of this page for each individual.

- 1 = Strongly Disagree
- 2 = Disagree
- 3 = No opinion
- 4 = Agree
- 5 = Strongly agree

**FIELDWORK EDUCATOR NAME:** \_\_\_\_\_

**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):

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General comments on supervision:

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