

Queen's University
School of Rehabilitation
Occupational Therapy Program



Occupational
Therapy

M.Sc.OT

Fieldwork Resource Manual

For courses:

YEAR 1 OT846

YEAR 2 OT847 OT 862 OT877

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*Every effort has been made to ensure that this manual is up-to-date, complete and accurate.
However, where University and/or School policy is concerned the student/preceptor is advised that
official University, School of Graduate Studies and/or School of Rehabilitation Therapy Policy
shall prevail over this manual.*

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Contents

Queen's University.....	1
School of Rehabilitation.....	1
Occupational Therapy Program	1
1.0 Preface	5
2.0 Fieldwork Curriculum.....	5
2.1 Fieldwork Integration.....	6
2.2 Fieldwork Overview.....	7
2.3 Fieldwork Educators	8
2.4 Roles and Responsibilities of the Student, University Faculty, Agency/Facility	8
2.5 Fieldwork Liaison Committee (FLC)	12
2.6 Fieldwork Course Requirements.....	12
2.7 Fieldwork Placement Dates	13
2.8 Geographic Settings for Fieldwork Placements	14
3.0 Fieldwork Education Process I:	15
Applying for Fieldwork Placements	15
3.1 Application for Fieldwork Placements	15
3.2 Assigning Fieldwork Placements	20
4.0 The Clinical Education Process II:.....	20
Preparation for Fieldwork Placements	20
4.1 Student Preparation Sessions.....	21
4.2 Police Criminal Record Checks.....	21
4.3 Occupational Health and Safety Policies.....	22
4.4 Trouble Shooting Prior to Placement	27
4.5 Requests for Leave for Special Events.....	27
4.6 Workshops and in-services for clinicians.....	28
5.0 The Clinical Education Process III:.....	28
During Placement	28
5.1 Setting Learning Objectives.....	29
5.2 Placement Organization	29
5.3 Student Presentations	30
5.4 Feedback	30
5.5 Evaluation and self-evaluation	30

5.6 Criteria for Assessment	34
5.7 Grading of Fieldwork Placements	40
5.8 Concerns Exist form	40
5.9 Fieldwork Award Nominations	40
5.10 Trouble Shooting During Placements	41
5.11 End of Fieldwork Placement	42
5.12 Confidentiality	43
6.0 Professional Responsibility	44
6.1 University Code of Conduct & SRT Professional Behaviour Policy	44
6.2 Code of Ethics – Occupational Therapy Practice	44
6.3 Agency/Community Code of Ethics	45
6.4 Confidentiality and the Protection of Personal/Health Information	45
6.5 Attendance	45
6.6 Professional Image	45
7.0 Academic Regulations	46
7.1 Standing	46
7.2 Student Withdrawal from Placement	47
7.3 Academic Decisions/Failure/Withdrawal on Academic Grounds	47
8.0 References	48
9.0 Appendices	
A MScOT Academic Course Descriptions	
B Occupational Therapy Fieldwork Levels	
C CGFEOT & FS-PRO	
D Standards for the Supervision of Students	
E SRT Affiliation Agreement	
F Canadian Association of Occupational Therapists Code of Ethics	
G International Fieldwork Resources	
H Pre-placement information and forms	
I WSIB Student Declaration of Understanding	
J Learning Objectives	
K Passport to Fieldwork Education	
L OTFAC Example Indicators for Levels 1-4	
M Student Placement Feedback Form (for Clinical and Community Development Placements)	
N Community Development Award Descriptions	
O Concerns Exist Form	
P Fieldwork Award Nomination Form	

Q

Memorandum of Understanding and Statement of Confidentiality

1.0 Preface

The Queen's Occupational Therapy Program is uniquely recognized for its strong focus on communities, from local to global. The Queen's program offers an exceptional student experience on a community-connected campus with integrated and diverse community learning opportunities. The Fieldwork Manual acts as a guide for all clinical education components of the Master of Science Occupational Therapy (MScOT) program.

Program Vision

To transform individuals, communities and systems through the power of occupation.

Program Mission

Inspire and educate occupational therapy professionals, leaders and scholars to advance knowledge and enable occupation for individuals, groups, communities and populations.

A full description of the Program Goals, Objectives, Curriculum Design and Academic Course Descriptions are available via the School of Rehabilitation Therapy (SRT) website at <https://rehab.queensu.ca/>. Academic Course Descriptions are available in Appendix A.

For further information, please contact any of the following individuals in the Occupational Therapy Program at the SRT:

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2.0 Fieldwork Curriculum

Fieldwork education is an essential component of an occupational therapy professional educational program and comprises approximately one-third of the curriculum. It is a collaborative process that involves a variety of supervised field experiences related to the practice of occupational therapy. The aim is to integrate and apply academic and theoretical knowledge in a practice setting in the three domains of learning: skills, attitudes and knowledge, and to foster the development of clinical reasoning and professional identity (Committee on University Fieldwork Education [CUFE] and Association of Canadian Occupational Therapy University Programs [ACOTUP], 2024). Fieldwork education can be conceptualized as occurring along a continuum of professional development. Refer to Appendix B.

2.1 Fieldwork Integration

The fieldwork curriculum has been designed to integrate each of the fieldwork courses directly with a theoretical course. See Appendix A for OT846, OT847, OT862 and OT877 fieldwork course descriptions. Students are expected to use experiences from the practice setting to integrate concepts taught into theory courses. They are also expected to use concepts taught in theory courses into the practice setting.

The related courses are as follows:

Fieldwork Course	Theory Course(s)
OT 825 Lived Experience	OT 824 Culture, Equity and Justice
OT 851 Client-Centred Communication	OT 851 Client-Centred Communication (integrated theory)
OT846 Occupational Therapy Fieldwork I	OT 882 Psychosocial Determinants of Occupation I OT 881 Physical Determinants of Occupation I OT 801 Conceptual Models in Occupational Therapy OT 802 Models of Practice in Occupational Therapy OT 824 Culture, Equity, and Justice
OT 862 Applied Community Development	OT861 Community Development in Occupational Therapy
OT847 Occupational Therapy Fieldwork II	OT 884 Psychosocial Determinants of Occupation II OT 886 Environmental Determinants of Occupation I OT 885 Physical Determinants of Occupation II OT 883 Cognitive-Neurological Determinants of Occupation I OT 826 Enabling Occupation in Children & Youth OT 827 Enabling Occupation in Older Adults OT 852 Group Theory and Process
OT877 Occupational Therapy Fieldwork III	OT 871 Advanced Clinical Reasoning OT 853 Coaching and Counselling for Occupational Change OT 875 Advanced Professional Practice OT 887 Environmental Determinants of Occupation II OT 889 Cognitive-Neurological Determinants of Occupation II

The following table is a summary of the occupational therapy fieldwork curriculum:

Level	Course	Placement Sites	Time Frame	Hours
1	OT 825 - Lived Experience	Kingston community	Year 1	6
1	OT 851 - Client-Centred Communication	Clinical Teaching Centre	Year 1	12
1	OT846 – Occupational Therapy Fieldwork I	All fieldwork sites	Year 1	300
2	OT847 – Occupational Therapy Fieldwork II	All fieldwork sites	Year 2	300

3	OT877 – Occupational Therapy Fieldwork III	All fieldwork sites	Year 2	300
3	OT862-Applied Community Development	Community Sites	Year 2	185
				Total Hours = 1103

2.2 Fieldwork Overview

Students complete a wide range of experiences in numerous health care practice environments. Every effort is made to ensure diversity in both practice environments and client conditions. All students will complete one fieldwork placement in the area of mental health. Remaining placements must be varied in experience, skillset and will be based upon availability.

- A mental health fieldwork placement is one where the **primary focus** of assessment and/or intervention relates to psychological, emotional and/or social determinants of occupation.

All students must complete a Community Development placement, which ensures exposure to a community practice environment and the opportunity to enable occupation at the level of the community.

In 2003, the University Fieldwork Coordinators Committee of the Association of Canadian Occupational Therapy University Programs (ACOTUP) developed the Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT) in consultation with fieldwork partners from across the country (CUFE & ACOTUP, 2024). These guidelines, revised in 2024, outline the vision for the promotion of excellence in fieldwork education (Appendix C). The guidelines also provide the Fieldwork Site Profile (FS-Pro), a document that provides a framework for identifying each site's fieldwork education programs and other useful information for placement selection and preparation. The University maintains an FS-Pro for all in-catchment sites. The FS-Pro for individual site(s) is available to students via their learning management system (LMS).

Informal site review takes place on an ongoing basis through regular site visits, preceptor contact, and student feedback. Students complete fieldwork feedback at the mid-term and final points of each fieldwork course. The students provide feedback directly to the preceptor and the feedback is reviewed by the fieldwork coordinator following each placement. Any concerns raised or highlighted are first followed up with the student. If further action is warranted the issue is brought to the occupational therapy program.

2.3 Fieldwork Educators

Therapists must follow the standards from their respective regulatory body or professional association related to the supervision of students. It is required that the fieldwork educator complete one year of full-time practice and registration with the provincial regulatory organization prior to serving as a fieldwork educator. The occupational therapy program offers continuing education, support, and recognition for all fieldwork educators. Refer to Appendix D for the College of Occupational Therapists of Ontario (COTO) Standards for the Supervision of Students (COTO, 2023).

2.4 Roles and Responsibilities of the Student, University Faculty, Agency/Facility

A successful fieldwork experience involves joint effort and responsibility on the part of the fieldwork preceptor and student. The fieldwork preceptor's role involves integrating a student program into the fieldwork setting, modeling professional practice behaviours, guiding student participation within the setting, and providing formal and informal feedback and evaluation of performance to the student and appropriate university personnel. An affiliation agreement (Appendix E) must be active and in place prior to the commencement of any fieldwork placement.

STUDENT Responsibilities

- Cover all expenses relating to fieldwork placements including, but not limited to:
 - travel to the geographic location of placement facility or agency
 - daily travel to and from facility/agency
 - accommodations and food
 - criminal record checks
 - immunizations and certifications (e.g. CPR-HCP, first aid, NVCI, WHMIS, etc.)
 - appropriate apparel and the university authorized student name tag
- Consistent with the 2024 CGFEOT, students are responsible to:
 - Develop competencies for the application of the occupational therapy process
 - Take responsibility for their learning experience and the direction of that experience in partnership with fieldwork educators, onsite fieldwork coordinators, university professors and university fieldwork coordinators.
 - Uphold legal standards and the Code of Ethics at all times (CAOT, professional regulatory body, fieldwork site, university program). Refer to Appendix F for the CAOT Code of Ethics.
 - Comply with site and university policies and procedures.
 - Increase their understanding of and promote the roles and functions of occupational therapists.
 - Learn how occupational therapists contribute to the service delivery team
 - Increase their understanding of the systems in which occupational therapists practice.
 - Increase their understanding of and respect the roles and functions of other team members.
 - Develop confidence and competence in their practice of occupational therapy.
 - Set personal and professional goals before the beginning of the fieldwork experience. Review and adjust them throughout the placement.
 - Complete all necessary required learning before and during the fieldwork experience including readings and other forms of learning activities (e.g., online modules, trainings, reviewing lectures).
 - Uphold the workplace readiness standards required of a healthcare professional before and during their fieldwork experience (e.g., respect the site dress code, use of professional communication in person, with the use of a cell phone and online/via email).
 - Communicate with the university fieldwork coordinator/professor any time during their fieldwork experience if they encounter challenges in developing their competency profile.
 - Provide feedback to their fieldwork educator based on their fieldwork learning experience.
 - Provide feedback and submit an evaluation of their fieldwork experience to their university fieldwork professor/ coordinator following each placement.

Students MUST NOT schedule any other commitments during designated fieldwork blocks.

Academic Integrity Statement: Academic integrity is constituted by the five core fundamental values of honesty, trust, fairness, respect and responsibility (see: www.academicintegrity.org). Adherence to these values by students and faculty is central to build, nurture and sustain a thriving academic community. Students are responsible for familiarizing themselves with the regulations concerning academic integrity and for ensuring that their academic work (e.g., assignments, exams, clinical education activities, etc.) conforms to the principles of academic integrity (see: Academic Integrity | Queen's University). Departures from academic integrity (such as plagiarism, use of unauthorized materials, facilitation, forgery and falsification) are incompatible with the academic community at Queen's.

Given the seriousness of academic integrity matters, actions which contravene academic integrity carry sanctions that can range from a warning or the loss of grades on an assignment to the failure of a course to a requirement to withdraw from the university.

If you have any questions about adhering to the principles of academic integrity, please speak to your instructor or the Associate Director for the Occupational Therapy Program.

Statement Regarding Recording/Digital Images: Students may not create video, audio or other digital recordings/images of fieldwork activities. Students will be subject to disciplinary actions under the Queen's University Student Code of Conduct and the Professional Behaviour Policy if this is violated.

Statement Regarding use of Generative Artificial Intelligence (GenAI): Students are required to know and follow University AI policy. Clinical placement is an extension of schooling; therefore, all Queen's policies apply. Students must follow their individual clinical placements sites while on placement. Information about Queen's policy is available at <https://www.queensu.ca/ai/>.

UNIVERSITY FACULTY Responsibilities

- Offer academic coursework that addressed the theory which provides rationale and direction for evidence based occupational therapy practice.
- Provide opportunities for student learners to learn and practice occupational therapy skills and techniques needed for general practice.
- Offer academic coursework that introduces student learners to clinical reasoning and problem-solving strategies for use in clinical situations.
- Include coursework that introduces students to pertinent legislation, regulations and guidelines, including the legal parameters of occupational therapy practice.
- Model professional behaviours that are consistent with professional and ethical standards for occupational therapy.
- Be available to student learners and preceptors as a resource, and to assist if problems arise in fieldwork placements.
- Ensure that the University provides adequate liability coverage for students while on clinical placement.

UNIVERSITY FIELDWORK COORDINATOR Responsibilities

The university fieldwork coordinators are faculty member of the Occupational Therapy Program.

- Consistent with the 2024 CGFEOT, the university fieldwork coordinator is responsible to:
 - Support students to develop a good understanding of their professional growth with respect to core competencies as described in the *Competencies for Occupational Therapists in Canada 2021* (CAOT, 2021) by providing fieldwork preparation (e.g. orientation and resources) and debriefing sessions (e.g. integration of theory with practice) to students.
 - Support fieldwork educators with orientation and educational resources related to the university academic and fieldwork education programs and the supervision process.
 - Recruit and coordinate fieldwork opportunities, while striving to assign students to teaching sites according to students' university and fieldwork profiles and personal interests and requests.
 - Support students to make suitable choices with regard to establishing a varied fieldwork education profile (clienteles and fieldwork settings) to be eligible for licensure.
 - Offer ongoing support and problem solving to students and fieldwork educators in dealing with teaching-learning challenges.
 - Complete data management related to student fieldwork experiences, fieldwork educators and teaching sites to assist in analysis of quality fieldwork opportunities and experiences.
 - Recognize fieldwork partners who contribute time and expertise in educating students.
 - Work with teaching sites to negotiate a fieldwork agreement, either temporary or long term, describing the liability and responsibilities of each party, as well as any pre-fieldwork requirements.
 - Ensure students are provided with appropriate liability coverage and work site insurance.
 - Regularly assess the content and quality of supervision given and provide recommendations to fieldwork sites and feedback to fieldwork educators.
 - Regularly assess the content and quality of the environment in which the placement occurs to ensure appropriate resources are available to support a positive learning environment and provide recommendations to fieldwork sites.

(CUFE & ACOTUP, 2024)

AGENCY/FACILITY Responsibilities (where the placement takes place and its staff)

The Site Fieldwork Coordinator is an individual at a clinical education site who coordinates and arranges the clinical education of the occupational therapy student and who communicates with the University Fieldwork Coordinator and faculty at the educational institution. This person may or may not have other responsibilities at the clinical centre. At sites where a Site Fieldwork Coordinator is not designated, the preceptor normally carries out this function. The Site Fieldwork Coordinator and preceptors are invited to sit as members of the Fieldwork Liaison Committee.

The OT preceptor is an occupational therapist who holds a current registration to practice in their jurisdiction, who normally has a minimum of one year of clinical experience and who is responsible for the direct instruction and supervision of student occupational therapists at the clinical affiliation site. Occupational Therapy students may also have the opportunity to learn from non-OT preceptors who fulfill many of the same roles. In the context of OT846, OT847 and OT877 students may have the opportunity to participate in role-emerging fieldwork placements

where the site preceptor is not an OT. In those cases, a registered OT will always be identified to support and guide the development of OT-specific skills.

Each preceptor is responsible to uphold the standards of their respective college or regulator. Generally, **each preceptor has following responsibilities:**

- Accept responsibility for facilitating student learning.
- Provide feedback with respect to non-verbal and verbal aspects of communication (e.g. including body language, professional dress and hygiene).
- Act as a professional role model and demonstrate an awareness of the impact of this role on students.
- Orient the student to the geography of the site and the agency's policies and procedures.
- Make the student aware of ethical and legal parameters within the relevant practice context.
- Work with the student on learning objectives within the fieldwork assessment tools and clarifying mutually agreed upon goals, objectives and expectations at the beginning and throughout the learning experience.
- Provide the student with opportunities to observe, practice and document the continuum of skills and behaviours necessary in the assigned clinical area including client assessment, treatment planning, treatment interventions, re-assessment, discharge planning, auxiliary personnel supervision and administrative tasks (e.g. workload measurement systems).
- In the case of affiliations not involving direct client care (e.g. administrative, consultative and research), provide opportunities to observe, as well as designate and supervise appropriate projects.
- Provide timely formal and informal verbal feedback to each student as well as thorough written mid-term and final performance evaluations by collecting information through direct observation, discussions with the student(s), review of the students' client documentation and noting relevant observations of others; the process should be educational, objective and engage the student in self-evaluation.
- Advise the student in the choice and format of a presentation (e.g. a case history, patient handout) to clinical staff during the clinical placement; schedule and attend the student's presentation and provide feedback to the student.
- Liaise with the University Fieldwork Coordinator to clarify any concerns with respect to the affiliation or the student's performance as they arise, to document student performance that is unsafe or requires remediation and to provide formative feedback to the university regarding the curriculum and/or clinical affiliation process.

In Ontario, Occupational Therapists should refer to the College of Occupational Therapists Standard for Supervision of Students and Occupational Therapy Assistants (2023). Refer to Appendix D for this standard.

2.5 Fieldwork Liaison Committee (FLC)

The Fieldwork Liaison Committee Mandate

1. To provide a forum for effective communication between the Occupational Therapy Program, clinical facilities and students regarding clinical education.
2. Consider all matters related to the development, organization, and administration of fieldwork, including but not limited to supervision, student preparation, and evaluation.

3. Make recommendations regarding policies and procedures related to fieldwork to the Occupational Therapy Program Committee.

Membership on the committee will include the Fieldwork Coordinator, the Associate Director of the SRT and Chair of the Occupational Therapy Program (or delegate), the appointed student representatives from each year of the professional program (or delegate), and the Site Fieldwork Coordinator (or delegate) from each affiliated agency in the Queen's University catchment area. Clinical educators in the Queen's University catchment area, other faculty and students are welcome to attend meetings. Those wishing to attend must notify the Chair prior to the meeting.

The committee meets, at minimum, twice a year in the spring and fall. To reach our clinical community within the periphery of our catchment area, regional Fieldwork Liaison Committee meetings will be held in a hybrid format, virtually and in-person. The hybrid meeting format is intended to support accessibility for all at various locations across the Queen's catchment area. Agendas for the meetings and minutes of the meeting are circulated to all Queen's catchment area agencies. All individuals involved in the instruction and/or supervision of Queen's University occupational therapy students are encouraged to provide feedback via this committee. The Fieldwork Liaison Committee reports to the Occupational Therapy Program Committee.

2.6 Fieldwork Course Requirements

In addition to the fieldwork hours that are integrated into academic courses, MScOT students undertake three (3) clinical fieldwork placements and one (1) community development fieldwork placement. Each clinical fieldwork placement has a university credit weighting of eight (8) credits. The Community Development fieldwork placement has a university credit weighting of six (6) credits. Fieldwork hours for OT 825 (Lived Experience) and OT 851 (Client-Centred Communication) are integrated into the overall course weighting.

Fieldwork Course Descriptions

Please refer to Appendix A for further specifications for each fieldwork placement and the relationship of academic course work to fieldwork placements.

Fieldwork Course	Credit Weight	Description
OT 825 Lived Experience	1.5	In this fieldwork course, pairs of first-year students meet with a volunteer from the Kingston community who identifies as having a health condition that contributes to experiences of disablement. The goal of this unique learning relationship is to improve students' understanding of disability and facilitate their embracing the concept of client-centred practice whereby a client's life experiences are acknowledged, and they become partners in the occupational therapy process.
OT851 Client-Centred Communication	3.0	This course focuses on the development of communication skills within the context of client-centred occupational therapy practice. The critical elements of the therapeutic relationship will be developed through interviewing and assessment strategies. This course will make extensive use of supervised video recording, and interaction with community volunteers through the Clinical Education Centre. In addition, students will gain experience in professional communication skills.
OT846 Occupational Therapy Fieldwork I	8.0	This fieldwork course, completed continuously and offered in a practice setting, will allow the student to focus on generic assessment skills, developing communication skills and application of OT knowledge to the

		practice setting. Prerequisites: OT 825 and OT 851 or permission of the course coordinator.
OT847 Occupational Therapy Fieldwork II	8.0	This fieldwork course, completed continuously and offered in a practice setting, will allow students increased independence in working with clients including assessment, intervention and application of OT knowledge. Prerequisites: OT846 or permission of the course coordinator.
OT862 Applied Community Development	6.0	This fieldwork course, completed continuously, will provide the opportunity for students to explore the process of working with communities to enable occupation and to create inclusive communities and environments. Prerequisites: OT847 or permission of the course coordinator.
OT877 Occupational Therapy Fieldwork III	8.0	This fieldwork course, completed continuously and offered in a practice setting, will allow students to consolidate OT knowledge and skills. The focus of this final fieldwork placement is for the student to maximize independence in the areas of assessment, intervention, programming and evaluation. Prerequisites: OT847 or permission of the course coordinator.

2.7 Fieldwork Placement Dates

Academic and fieldwork components of the program are presented in blocks throughout the two years of the program. The main fieldwork blocks are eight weeks (300 hours) in duration (exception OT862 – Community Development, five weeks [185 hours]).

Fieldwork Placement Dates 2026-2027

OT846, Level 1	January 4 – February 26, 2027
OT847, Level 2	October 26 – December 17, 2026
OT877, Level 3 – Block A	April 12 – June 4, 2027
OT877, Level 3 – Block B	June 9 – July 30, 2027
OT862, Community Development, Block A	April 12 – May 14, 2027
OT862, Community Development, Block B	June 28 – July 30, 2027

Please refer to the onQ student resource website for updated sessional dates and timetables.

2.8 Geographic Settings for Fieldwork Placements

All students are required to undertake fieldwork placements during their course of study in settings affiliated with the university, under the supervision of qualified professional staff. Placements take place in the Queen's Catchment area. Limited placement opportunities exist in Northern Ontario and internationally.

Each university offering an occupational therapy program has an associated catchment area. The catchment areas are designed to offer all universities equal opportunities for fieldwork placements. This means that Queen's students are the only students who are able to apply for and be assigned a placement at a site within the Queen's catchment area. The relationship that exists between Queen's School of Rehabilitation Therapy and its catchment area sites is valued and reciprocal in nature. The Queen's catchment area extends approximately west to York region, north to Peterborough and Renfrew County and east to Cornwall. All students must be prepared to accept assigned placements. To clarify, students should not expect that all or indeed any of their placements will be completed within Kingston and should be prepared to take advantage of placements in other regions within the catchment area.

Students (or individuals acting on behalf of students) are not permitted to approach facilities or therapists to negotiate/secure their own placement. Failure to follow this guideline is considered a breach of the professional behaviour policy and may result in the student being removed from the fieldwork learning opportunity.

The Queen's University catchment includes the areas within:

- **Core Queen's OT Catchment:** Belleville, Brockville, Brighton, Campbellford, Cobourg, Durham, Frontenac County, Hastings County, Kawartha Lakes, Kingston, Leeds & Grenville County, Lennox & Addington County, Lindsay, Napanee, Northumberland, Oshawa, Peterborough, Port Hope, Prescott, Prince Edward County, Trenton, Uxbridge
- **Shared with University of Ottawa:** Almonte, Arnprior, Barry's Bay, Carleton Place, Cornwall, Deep River, North Lanark County, Pembroke, Perth, Renfrew County, Smith Falls, Stormont Dundas and Glengarry County, Winchester
- **Shared with University of Toronto:** Ajax, Aurora, Central York Region, Maple, Markham, Newmarket, Pickering, Richmond Hill, Southwest York Region, Southeast York Region, Stouffville, Thornhill, Whitby, Vaughn

Northern Ontario Placements

Northern Ontario placements are arranged by Queen's through the Northern Ontario School of Medicine (NOSM). Students with an interest in completing a fieldwork placement in Northern Ontario must follow instructions provided by the University Fieldwork Coordinator (i.e., applications are accepted at various times of the year). Information about NOSM is available via <https://www.nosm.ca/>.

Placements throughout Canada

Currently, all Canadian Universities are only offering fieldwork opportunities within their catchment area to their respective students. Students with extenuating circumstances who require consideration for a placement in another catchment area must do so via the University Fieldwork Coordinator. Under no exceptions, may a student recruit, broker or otherwise solicit a placement in another catchment area. Any effort by an individual student to recruit an out of catchment placement will be deemed a breach of the Professional Behaviour Policy.

International Fieldwork Placements

Students may apply to complete an international placement outside Canada in the final year of the program, as part of OT862 and/or OT877. Information sessions are held in the Winter/Spring of Year 1 for students interested in international placements. Section 3, Applying for Fieldwork Placements, describes the process for international placements.

3.0 Fieldwork Education Process I: Applying for Fieldwork Placements

This section outlines the process of applying for placements and how placements are assigned within the Occupational Therapy Program.

3.1 Application for Fieldwork Placements

The administrative processes outlined below have been carefully developed over time by the OT Program, the SRT, and CUFE with input from students and clinicians to provide the best possible infrastructure to support the fieldwork education curriculum. Inherent in this process is the ongoing support of all stakeholders, including those in the professional community (Site Fieldwork Coordinators, Preceptors and agency staff), the public, the academic community (University Fieldwork Coordinator, faculty, administration) and students. Students are therefore required to adhere to this process.

Placement organization by the University Fieldwork Coordinator is a lengthy and ongoing process involving:

- Requesting fieldwork placement offers from clinical facilities.
- Confirming offer details and loading information into the database.
- Making offers available for students to view and select fieldwork placement preferences.
- Reviewing students' request of their fieldwork placement preferences.
- Assignment of fieldwork placements and release of information to class.
- Informing facilities of student allocations.
- Ensuring preceptors have the information they need to maximize the student learning experience.
- Ensuring students receive information about site-specific pre-placement preparations that have been shared with the SRT.
- Ensuring Affiliation Agreements are in place.
- Preparing the student placement evaluation packages for distribution to preceptors/sites.

Offers of Placement from Placement Facilities

Offers are requested from placement facilities in the Queen's catchment area in an 'Annual Call for Offers'. The 'Annual Call for Offers' is consistent with OT programs across Ontario and Canada. The second phase of offer recruitment is a targeted recruitment based upon the fieldwork block. The targeted recruitment usually takes place 3-4 months in advance of the fieldwork block. The final phase of offer recruitment takes place up to 4 weeks prior to the start of the fieldwork block. The time required to recruit fieldwork placement offers depends upon several factors beyond the control of the university, OT Program, SRT, and the site(s). To complete placement allocations in a reasonable length of time, avoiding delays in communication with fieldwork sites and difficulties in students arranging travel and accommodations, timelines for pre-placement requirements must be followed. Despite the best efforts of the university, the student and the placement site, and due to circumstances beyond their control, there may sometimes be delays in notifying sites of placement confirmations and/or in the sites receiving the student information packages.

Please remember: Any initial contact with a facility including questions about the availability of placements or alterations in the assignment of fieldwork placements must be administered by the University Fieldwork Coordinator. **Under no circumstances** may a student (or person representing a student) contact a clinician or facility in Canada directly to inquire about placements, obtain or alter a placement. The only exception to this rule is for international placements when students normally make the initial contact and inquiries.

Guidelines for Placement

- All placements will take place in the Queen's Catchment area, with exception of those granted a NOSM or International Placement opportunity. All students should expect the possibility of being relocated outside of Kingston for placements.
- All placement offers will be reviewed in class. Please ensure to ask any and all questions prior to selecting choices. The University Fieldwork Coordinator may not always be available on the day of, or day before, you need to make fieldwork related decisions.
- It may not be possible to grant more than one mental health placement at Queen's so students are not permitted to request a 2nd placement in mental health area unless the university fieldwork coordinator identifies that it is open to those that have already satisfied the program requirement; and
- Until fieldwork placement assignments are finalized, DO NOT commit to employment, social occasions, extracurricular courses or travel during designated fieldwork blocks. Students cannot miss hours of placement for any of the above circumstances.

Fieldwork Accommodations

Queen's University is committed to achieving full accessibility for persons with disabilities. Part of this commitment includes arranging academic accommodations for students with disabilities to ensure they have an equitable opportunity to participate in academic activities and meet the academic requirements of the program. If you are a student with a disability and think you may need accommodations for your clinical placement, you are strongly encouraged to contact the Queen's Student Accessibility Services (QSAS) office and register as early as possible. For more information, including important deadlines, please visit the QSAS website at <http://www.queensu.ca/studentwellness/accessibility-services>.

Should you experience extenuating circumstances or illness that requires accommodation for a limited time, please refer to Student Wellness Services Extenuating Circumstances at <http://www.queensu.ca/studentwellness/home/forms/extenuating-circumstances>.

Special Requests from Students

Students frequently make special requests for placements. The following situations will be given special consideration in the allocation of fieldwork placements. Please note that we will do everything that we can to accommodate the following extenuating circumstances, as able, but in no way are we obligated to. Some examples of appropriate special requests are as follows:

1. A student is a single parent with one or more children.
2. A student with a baby or very young child.

Requests for special consideration that are not valid include, but are not limited to:

- Lack of money/large loan to pay off.
- House or apartment in Kingston so unable to afford paying additional rent for accommodation while on placement in another city.
- Lack of access to appropriate transportation to participate in a placement (e.g., no regular access to a vehicle)
- Do not have a licence (with exception of medical or disability related reasons documented with QSAS).

- Partner is here and do not want to be separated for placement duration.
- Scheduled trips during placement periods (weddings, vacations etc.)
- Students who have part-time jobs.
- Students on sports teams.

Please note: due to our dependence on a fluctuating clinical environment, Queen's School of Rehabilitation Therapy cannot guarantee that all students will be placed according to their preferences during any fieldwork placement period.

In-Catchment Requests

A web-based resource is used to enable students to both view fieldwork placements opportunities and submit their fieldwork placement preferences. Matching is carried out using a computer system and students are automatically provided with their fieldwork placement match, including site details and contact information.

Students identify their placement preferences through the web-based resource. Students must enter ten(10) fieldwork placement preferences – with one choice needing to be outside of the city of Kingston. Matching is completed electronically; however, the university fieldwork coordinator will review student preferences to ensure students meet the fieldwork requirements (physical and mental health placements). The matching process is designed to ensure the greatest number of students receive a fieldwork placement match. Preferences must be submitted via the online system by the deadline determined by the University Fieldwork Coordinator. Late requests will be considered **after** the initial matching has been completed . Requests will not be considered if all preferences are made at one facility or in one city (i.e. Kingston). Placement allocation decisions will be made by the fieldwork coordinator, and will be final. A student who chooses to refuse a fieldwork placement allocation will risk compromising their academic progress in the OT Program.

Out-of-Catchment Requests

If a student requires a placement outside of Queen's catchment area for an extenuating circumstance, please contact the fieldwork coordinator. Fees may apply, which are at the student's expense.

Northern Ontario Requests

Students interested in a fieldwork placement via the Northern Ontario School of Medicine University (NOSM) must respond to the University Fieldwork Coordinator's 'call for interest'. The 'call for interest' will be timed with application deadlines set by NOSM. Once approved by the University Fieldwork Coordinator, select students will be able to apply to NOSM for a fieldwork placement in a NSOM community.

Placements may be funded for travel and accommodation. The number of placements available to each Ontario Occupational Therapy program is dependent on placement offers, availability of accommodation and the number of placement requests as funding is shared amongst Ontario university programs. Normally Queen's University students are able to access approximately 7 placements annually through this program.

Please see the NOSM website at <http://www.nosm.ca/> for a full description of the programs, locations and types of placements available. Placements for rehabilitation therapy students are arranged through the Rehabilitation Studies stream. Once approval of the University Fieldwork Coordinator is obtained, students apply directly to the website to request placement at

<https://www.nosm.ca/education/rehabilitation-studies/>. These fieldwork placements are only available for OT846, OT847 and OT877. Please note that NOSM sets their own dates for application and your fieldwork coordinators will advise of the dates for 2026-2027. Students should also note that generally, NOSM only allows a student to complete a maximum of two (2) fieldwork placements via NOSM. Students are encouraged to review the NOSM handbook available through the student learning management system.

International Requests

An International Fieldwork Placement in the MScOT Program is an optional way to achieve course credit for one of the required fieldwork placements in the OT Program (i.e. OT 862, and/or OT877). It is recognized that International Placements provide students with a unique opportunity to develop clinical skills, while also combining learning in the areas of global education and cultural diversity. The safety of all students on an international clinical placement is of paramount importance, and the University has a responsibility to help manage the risks associated with International Placements.

To be considered for a placement outside of Canada, a student must be approved by the Occupational Therapy Program. Conditions for eligibility:

1. The student must be in their final year of the program to participate in an International Placement.
2. A student may participate in only one International Placement (apart from OT 862 and/or OT877 – OT students may apply to complete an international clinical and community development placement)
3. A letter of intent and two references (one from a clinical instructor/preceptor and one from a faculty member) must be submitted by the student
4. The student must maintain a minimum overall grade point average of 80%, without exception. This standing must be maintained until the commencement of the International Placement.
5. The student must have progressed through the program with no conditions, concerns, or course failures.
6. The student must complete the “Acknowledgement of Risk” form and a “Higher-Risk” Off Campus Activity Safety Policy (OCASP) online submission, which must be approved by the International Placement Committee.
7. Completion of the pre-departure orientation, offered by the Fieldwork Coordinator is mandatory.
8. There must be favourable consensus from both the respective academic and clinical faculty that the student demonstrates professional behaviour in both academic and clinical situations (e.g., independence, maturity).
9. A signed affiliation agreement with the international site must be in place, prior to confirmation of the placement.
10. For “Level 2” countries [“Exercise high degree of caution”, according to Global Affairs Canada] students may be required to travel in pairs.
11. For “Level 2” countries (Global Affairs Canada), the International Placement Committee in the SRT must approve the country and/or region of interest. Applications must be submitted to the University Fieldwork Coordinator before the deadline (identified each year).

Eligibility requirements and arrangements for international placements must begin approximately one year in advance of the placement. See Appendix G for specific policy and process information about international placements. Please also refer to the Queen's University website at <http://www.safety.queensu.ca/ocasp/> related to *Student Safety in Off-Campus Activities*.

3.2 Assigning Fieldwork Placements

In-Catchment Placements

The Queen's Occupational Therapy Program uses a computer database to facilitate the placement process and ensure a system that is as equitable and efficient as possible for matching of students to in-catchment fieldwork placements. Placement offers from facilities and students' preferences are entered into the database. The University Fieldwork Coordinator will inform students when fieldwork placement offers are ready for the identification of student preferences. Offers will be made available through web-based system. Students will be required to indicate ten (10) preferences for each given fieldwork session, one of which needs to be outside the city of Kingston.

Steps in the matching process

1. Students identify ten(10) fieldwork placement preferences.
2. The University Fieldwork Coordinator will complete matching.

If all criteria are equal, fieldwork placements are assigned randomly for those placements requested by more than one student. Students with accommodations will be matched to a placement that meets their required accommodation – this does not mean that a top 10 match will be provided. The computer-aided matching system works to ensure that all students receive a placement match.

Informing students and acceptance of placement assignments

The University Fieldwork Coordinator will inform students of their fieldwork placement assignments as soon as possible after the matching process has concluded, usually 4-6 weeks prior to placement. Please be prepared for delays, usually due to delays in receiving fieldwork placement offers or confirmation from clinical facilities.

The University Fieldwork Coordinator or designate will inform facilities of student allocations and email/mail the evaluation materials to the facility. This usually happens within a week of the matching process. ONLY THEN should students contact their assigned facility.

STUDENTS PLEASE NOTE: It is possible that a placement may be cancelled by the site/preceptor at any point. These cancellations are beyond the control of the university and cannot be anticipated. The University Fieldwork Coordinator will work with the student to identify an alternate placement, and the student must be prepared to accept a placement as assigned.

4.0 The Clinical Education Process II: Preparation for Fieldwork Placements

Students are prepared for fieldwork placements through fieldwork preparation sessions during the academic block prior to the fieldwork placement. To prepare for preceptorship, all preceptors are offered workshops and in-services held virtually or on-site in the clinical facility.

Essential policies and procedures that must be complied with and completed in a timely fashion include items such as routine precautions, Ministry of Labour training, immunizations, CPR-HCP and First Aid training, Crisis Intervention Training, Workplace Hazardous Materials Information System (WHMIS) training, Accessibility for Ontarians with Disabilities Act (AODA) training, mask fit (N95 respirator) testing and criminal record checks. It is the responsibility of each student to maintain a portfolio of their required documents and bring them to the institution where they will complete their fieldwork placement. Failure to do so may result in cancellation of the fieldwork placement.

4.1 Student Preparation Sessions

Fieldwork preparation classes are scheduled during the academic block(s) prior to placement to inform students about the clinical placement process, policies and procedures and to discuss fieldwork education issues such as curriculum content, supervision in occupational therapy practice, models of supervision, ethics in clinical practice, conflict management, learning objectives and fieldwork placement performance evaluation and self-evaluation.

It is required that students attend ALL scheduled sessions.

Appendix H includes information about pre-placement requirements including documenting satisfaction of pre-placement requirements.

4.2 Police Criminal Record Checks

In accordance with the fieldwork sites' requirements, the SRT requires that all students complete a Police Criminal Record Check (CRC) including vulnerable sector screening (VSS).

Failure to produce the record of these checks by the date indicated by the program could mean the following:

- You will not be matched to a fieldwork placement.
- You may not be able to attend your fieldwork placement.
- You may be asked to leave your placement site and not return until you can show your CRC and/or VSS.
- A placement site may not accept you for a placement based on the results of your check.
- Progression through the program may be delayed or suspended.

Multiple police checks will be required throughout the program and all costs associated with obtaining the checks will be at the student's expense.

Many cities can take several weeks to complete the screening, charge a large amount, or make it difficult to receive the vulnerable sector screening. For this reason, we recommend that students obtain their check through the Kingston Police (unless you are living in Alberta or Manitoba). Your police check be done online as soon as you know your Kingston address by using the Kingston Police service at: <https://policechecks.kpf.ca/>.

Any student with a permanent address in Alberta or Manitoba must complete the CRC in that province, as they will not supply information to other provinces.

Because most placement sites will require a police check that is less than one year old, it is best to wait until at least July before obtaining one. All students are required to have a new criminal record check completed for second year and at the request of a clinical site. Some sites require that the check be completed within 6 months. The frequency of the check as requested by the site should be used by the student. Example, if your fieldwork placement site indicates it is their policy that a 'clear' CRC be dated within the last six (6) months, then it is the student's responsibility to ensure that their documentation meets the facility requirements.

STUDENTS PLEASE NOTE: The SRT follows the Faculty of Health Sciences (FHS) Police Records Check Policy Document, available at <https://meds.queensu.ca/sites/default/files/inline-files/Police%20Records%20Check%20Policy.pdf>. In any instance where the record is "not clear" the FHS shall convene a Special Review Committee with membership from each School within the FHS (i.e., Medicine, Nursing and SRT).

4.3 Occupational Health and Safety Policies

Ministry of Labour

In accordance with Bill 18, *Stronger Workplaces for a Stronger Economy Act* (Legislative Assembly of Ontario, 2014), all OT students must complete the Ministry of Labour (MOL) online module at: <http://www.labour.gov.on.ca/english/hs/training/workers.php>. The online learning covers a. to d. below, and general types of workplace hazards e to g.

- a. The duties and rights of workers.
- b. The duties of employers and supervisors.
- c. The roles of health and safety representatives and joint health and safety committees.
- d. The roles of the Ministry; the WSIB; and safe workplace associations and occupational health and safety medical clinics and training centres designated under the OHSA.
- e. Common workplace hazards.
- f. WHMIS.
- g. Occupational illness, including latency.

Upon completion of the online module, the student will receive a certificate of completion. A copy of the certificate of completion must be provided to the SRT, and the student must also bring a copy of their certificate of completion with them to all fieldwork placements.

There are some required elements to meet the standards set out in Bill 18 that need to be specific to the placement site and can therefore not be offered at Queen's. Training on workplace-specific risks and policies will need to be offered at the clinical site, as these will vary from site to site. Training could include:

- Workplace-specific hazards and hazardous materials
- Reporting health and safety concerns, incidents or injuries
- Health and safety policies, including workplace violence and harassment
- Emergency plan
- Name(s) of the Joint Health and Safety Representative(s)

Immunizations

Students are responsible for obtaining all necessary immunizations, maintaining their records and having the appropriate documentation available to show to their Preceptor, Site Fieldwork Coordinator or Site Placement Coordinator (human resources department) on the first day of their fieldwork placement. Failure to provide the required documentation may result in the student being ineligible for placement selection and assignment. Please note: some facilities require copies to be sent to them a minimum of two weeks in advance or may require documentation outside of that required by the SRT. Students assigned to these facilities will be informed and will be expected to comply with this request.

Please see Appendix H for a sample form that may be used for Proof of Immunization, Serological status, First Aid and CPR-HCP and for the Faculty of Health Sciences Policy on Blood Borne Diseases and Healthcare Workers (Students).

Upon registration, in the first year of the program (during orientation week), Occupational Therapy students must show proof of obtaining or completing the following:

- COVID-19 vaccination
- TB test * (2 step tuberculin skin test status)
- Varicella serological status
- Td/MMR (Immunization history for measles, mumps, rubella, diphtheria/tetanus)
- Polio
- Hepatitis B

Prior to their level 1 placement, 1st year students must show proof of obtaining the Influenza vaccine (Flu Shot). The date will depend upon the availability of the vaccine and students will be notified by the SRT when documentation is required.

In the Fall of second year, Occupational Therapy students must show proof of:

- One step TB test
- Influenza vaccine (Flu Shot) as soon as available
- Any updates of Year 1 results

STUDENTS PLEASE NOTE: It is the responsibility of each student to maintain their health records and to take a copy to the institution where they will complete their fieldwork. Fieldwork placements will be cancelled if the student does not produce the documentation by the dates requested by the program. Failure to produce proof of immunization and flu shot may delay or prevent you from graduating from your program.

First Aid and CPR-HCP Training

Students are required to hold current certification in First Aid (advanced or intermediate first aid) and Basic Life Support (BLS) (or an equivalent healthcare provider level CPR course) upon entry to the program. Acceptable certifications include those offered by organizations such as St. John Ambulance, the Canadian Red Cross, the Lifesaving Society, or another recognized training provider. Students must provide proof of completion of both certifications and are expected to maintain valid certification throughout the program.

A copy of these certificates must be uploaded to Synergy and added to SharePoint folders.

Proof of re-certification must also be provided to the clinical education team and, as required. Please see Appendix H for combined Immunization/Proof of First Aid and CPR-HCP form.

Crisis Intervention Training

In accordance with partner sites' policies, all students will be required to complete crisis intervention training and maintain their certification throughout the duration of their studies. All first-year students must complete training. The focus will be on the preventing and defusing situations in clinical settings. Training will be offered by Safe Management Group (SMG) through the SRT as part of fieldwork/clinical placement preparation. Students will be required to purchase a manual to participate in the training. Students will be required to pay for their course manual via the SMG online store prior to the training, as per the deadline set by the Fieldwork/Clinical Education Coordinator. Students who do not pay for their course manual or who are absent from the provided training, will be required to access training through a publicly available source (e.g. the CPI, a community college or community organization) and at their own expense.

If a student has previously completed crisis intervention training, the student will be required to provide proof of certification to a member of the clinical education team and upload it to SharePoint. A student with a valid certification should note that recertification will be required after two years and will only be offered by the school in September.

Mask Fit (N95 Respirator) Testing

All students must be fit-tested for a respirator mask for protection against communicable diseases. The SRT arranges for mask fit testing in the first year of the OT program. Students will receive a card with details of respirator mask fitting that they must carry with them to all placements. The expiration date is shown on the card, and up-to-date fitting must be maintained for all placements. Students who miss the arranged mask fit testing and/or require updated mask fit testing will need to access that on their own through publicly available sources. Any fees for testing (or re-testing) are the responsibility of the student. Any student unable to complete mask-fit testing for medical or faith-based reasons should contact the main office for a waiver.

Insurance Coverage

Fieldwork placement sites are not responsible for coverage for student trainees. There are two types of insurance coverage:

1. Liability Insurance; and
2. WSIB or private insurance.

The University coverage applies only during the fieldwork placement dates and does not apply to any personal activities, or personal property.

Liability Insurance

Students registered in a graduate program at the University, pursuing activities related to the furtherance of education in their discipline, are automatically covered by the University's liability insurance policy. Liability insurance provides students with financial protection should the student be sued for negligence causing bodily harm (student has physically injured someone), personal injury (student injures someone through libel, slander, or other such means), or property damage

(student damages property belong to the facility or to an individual). The insurance only covers activities performed as part of the student's duties on placement. Therefore, if a third party brings a claim against a student, and thus by extension to the university, it follows that the student will be financially protected by the University should negligence be proven in a court of law. Should such an incident occur, the School of Rehabilitation Therapy must be contacted immediately TEL: (613) 533-6103

Workplace Safety and Insurance Board (WSIB) or Private Coverage

Fieldwork placement sites are not responsible for carrying worker's compensation coverage for student trainees who are injured in the workplace. However, the University and the student do need to know if the facility/agency has WSIB coverage for its employees.

Students are required to participate in a mandatory education session on this topic, included as part of OT846. In this session the students are provided with information about workplace injury and coverage. Each student is required to complete a *Student Declaration of Understanding* as part of the mandatory education session. Refer to Appendix I.

If a student is injured while on placement, it is essential that the University Fieldwork Coordinator be notified immediately, and an accident/incident report including contact names and phone numbers must be completed by the hospital/community agency and submitted to the Queen's University Department of Environmental Health & Safety within 48 hours. Access the incident reporting form and submission portal at: <https://www.queensu.ca/risk/safety/report-incident>.

The following procedures will be carried out dependent upon the injury/claim and type of coverage:

a) For facilities covered by Workplace Safety and Insurance Board (WSIB), the Department of Environmental Health & Safety will send a Letter of Authorization to Represent the Placement Employer and the Postsecondary Student Unpaid Work Placement Workplace Insurance Claim form to the placement employer. The placement employer will be responsible for completing the relevant sections of these forms and sending them back to the Department of Environmental Health & Safety in a timely manner. The placement employer will also be responsible for having the student sign the Postsecondary Student Unpaid Work Placement Workplace Insurance Claim form, if student has remained on the placement after the injury.

The Department of Environmental Health & Safety will complete a Form 7 for the incident and submit all the required documents to the WSIB and the MTCU.

A copy of relevant documentation will be sent to the placement employer and the SRT.

b) For facilities not covered by WSIB, the Department of Environmental Health & Safety will arrange for completion and submission of the applicable Chubb Insurance Company of Canada insurance forms.

STUDENTS PLEASE NOTE: The student is fully responsible for understanding this process and ensuring that all the steps are carried out, as delineated, and in a timely fashion. Failure to do so will result in a loss of insurance coverage.

Accessibility for Ontarians with Disabilities (AODA) Training

Each OT student is required to complete the AODA training modules available via the Queen's Equity office at <https://www.queensu.ca/hreo/education>. The student must submit a copy of their proof of completion to the SRT and keep a copy for their own records. Proof of completion is due upon registration.

Workplace Hazardous Materials Information System (WHMIS)

Each OT student is required to complete general education related to WHMIS. In addition to this, students may be required to complete site-specific WHMIS training at the start of any/all fieldwork placements. The University cannot be responsible to carry out site-specific WHMIS training and the student must participate in the mandatory general training that is included in fieldwork preparation session(s).

Routine Precautions (Infection Control)

In accordance with partner sites' policies, all students will be required to participate in online training modules and a lab session during their studies. All students will be required to complete online modules related to:

- Chain of Transmission and Risk Assessment;
- Healthcare Provider Controls;
- Control of the Environment; and
- Additional Precautions.

Each student must submit proof of completion of the online modules prior to the lab session offered in OT846. All components are required to progress to clinical placement/fieldwork.

Additional Requirements

The SRT endeavours to communicate any site-specific requirements to the individual students, as communicated to the SRT by the site. It is the sole responsibility of the student to ensure that they have met the site requirements, even if they are different from those outlined here. In addition to this, the student is responsible for any costs to meet the requirements of the site. Failure to meet site-specific requirements may result in cancellation of a fieldwork placement and/or a delayed academic program.

STUDENTS PLEASE NOTE: The student is fully responsible for ensuring understanding of the requirements outlined in Section 4 of this manual and/or those outlined by the site following a fieldwork placement match.

4.4 Trouble Shooting Prior to Placement

It is important for all collaborators in fieldwork education to recognize the reality of changing clinical environments, practice trends, and changing student situations. The University does not have control over these situations, which in some circumstances may result in last minute changes or cancellations. It is the University Fieldwork Coordinator's role to attempt to find solutions to problems as they arise. The following is a brief, but not exhaustive, list of some possible problems and their follow up:

1. A shortage of numbers or types of placements:

- Additional requests for offers are made to Queen's catchment area clinicians and/or other University Fieldwork Coordinators (i.e. in shared catchment areas).
 - Clinicians are encouraged to consider alternate models of supervision (e.g. 2:1 two students with one therapist).
 - New Queen's catchment area sites are sought out.
 - Innovative fieldwork placement types are considered and developed as appropriate.
2. Cancellation of a fieldwork placement by the site:
- All attempts will be made by the University Fieldwork Coordinator to secure a replacement placement in the same timeframe; however, it may not be in the same geographic location or in the same practice area.
 - Cancellation of a fieldwork placement will not lead to any priority matching for subsequent fieldwork placements.
 - Any travel or accommodation payments made by the student will not be covered by the SRT. It is highly recommended that these be paid out by the student only once a fieldwork placement is confirmed by the site.
3. Two students wish to switch fieldwork placements:
- Direct switching of fieldwork placements is not permitted as it creates inequities in the matching processes.

4.5 Requests for Leave for Special Events

Conferences

The OT Program will make every effort to support students attending conferences offered by occupational therapy professional associations (especially during the academic blocks of the program). Where the conference overlaps with a fieldwork placement a student wishing to participate in either conference should discuss their request with the University Fieldwork Coordinator before finalizing plans and/or discussing plans with the site/preceptor. A decision will be made in consultation with the preceptor at the agency/facility in question. The time must be made up before successful completion of the fieldwork placement. Permission can be withdrawn if the student is not meeting expectations during the fieldwork placement in question.

Courses/Workshops/Continuing Professional Development Opportunities

The Clinical education courses are just that – courses. Time off should not be requested to attend other workshops, extracurricular or post-graduate courses. Occasionally, a course or workshop that is relevant to the placement may be scheduled concurrently. A student may attend such courses with the approval of BOTH the Preceptor and the OT program. Permission can be withdrawn if the student is not performing to standard during the placement in question.

DO NOT commit to employment, social occasions or travel during designated fieldwork blocks. Fieldwork placements are equivalent to employment and requesting vacation days or leave is not appropriate during the relatively short 8-week period of the fieldwork placement. The only legitimate reasons for leave are illness and bereavement.

Requests for leaves that are not valid include, but are not necessarily limited to:

- Attending a wedding;

- Attending a family event;
- Personal travel;
- Leisure pursuits;
- Sporting events; and/or
- Caring for an animal.

4.6 Workshops and in-services for clinicians

The OT Program supports clinicians as preceptors by offering workshops and in-services on clinical teaching topics. Workshops for clinicians are run throughout the year. A training module has been specifically designed to prepare first time preceptors, preceptors who have not had a Queen's student before, or OTs who have not been active in student supervision for over 2 years for their role in fieldwork placements. Training workshops may be requested at any time and can take place at Queen's, or the University Fieldwork Coordinator will travel to regional clinical facilities at the request of the clinicians. In addition, preceptor training workshops may be held in response to an identified need (new clinical education methods, curriculum changes, supervision skills, educational methods). These workshops are discussed at the Fieldwork Liaison Committee (FLC) meetings and organized by the University Fieldwork with the support of FLC members and the OT Program.

Continuing Education opportunities are also offered to clinicians in the Queen's catchment area in recognition of their contribution to student learning. Recent examples include a seating and mobility clinic, and a professional behaviours on placement lunch and learn. Some events are offered in response to clinician requests and are run on a cost-recovery basis.

5.0 The Clinical Education Process III: During Placement

The student will interact with numerous staff while on placement. Various individuals may be involved in student supervision at the placement site, including the preceptor, Site Fieldwork Coordinator, Department or Program Director and the University Fieldwork Coordinator. Please refer to Section 2 of this manual for descriptions of the various people supporting student supervision. Other occupational therapists or healthcare professionals may also invite the student to accompany them for educational purposes. All individuals the student interacts with are invited to contribute relevant information to the preceptor for the purpose of the mid-term and final assessment. If the student or preceptor has any concerns with respect to the placement they should be addressed as soon as they are apparent. If concerns on the part of either individual are not resolved satisfactorily, these concerns must be communicated to the University Fieldwork Coordinator as early as possible in order that all available options can be explored.

5.1 Setting Learning Objectives

Students are expected to have, and document, written learning objectives for each fieldwork placement. The learning needs of each student and the learning opportunities available will vary with each placement, but the process is consistent. Individual students require varied levels of guidance and therefore the learning objectives (student's goals for the fieldwork placement and

agreed upon methods of achieving these) will reflect those differences. It is essential that the learning objectives be developed as a collaboration between the student and the preceptor: the student should arrive with ideas about learning objectives; these are then discussed with the preceptor, who provides feedback and offers expectations consistent with the placement level and context. By the end of Week One, the student must have identified learning objectives agreed upon and documented as part of the fieldwork evaluation process. Refer to Appendix J for resources related to written learning objectives. It is recommended that each student develop 1 learning objective for each competency domain.

5.2 Placement Organization

The OT program has developed a “*Passport to Fieldwork*” education for students and preceptors to refer to before, during and at the end of placement. The “Passport” can be used as a simple guide to ensure major milestones are not overlooked. Refer to Appendix K for a copy of the passport.

Progression through the fieldwork placement

Depending on the level of the placement, the setting, area of practice and assessment of student performance by the preceptor, the level of independence in all placements may vary. Placements may begin with an observational period, when the student observes the therapist; the students may then perform selected components of assessment and treatment with appropriate feedback from the therapist. Once the student has demonstrated the required competence, they will assume increasing responsibility and independence towards the end of the placement. Independence takes many forms and does not always look like practicing without a preceptor. It should not be expected that students be practicing completely autonomously by the end of any placement due to various safety concerns and the need to be evaluated on skills. Caseload guidelines are provided for each placement level, and preceptors will determine what, if any, modifications are required to the guideline. Students must always be mindful that patient/client care is the preceptors’ first responsibility and that any activities the student performs are at the discretion of the registered OT supervising the fieldwork placement. Students are not autonomous in their assessments or interventions. The student must accept direction from the supervising OT throughout the fieldwork placement.

5.3 Student Presentations

Consistent with competency D of the Competencies for Occupational Therapists in Canada (ACOTRO, ACOTUP & CAOT, 2021, 2024), students are expected to engage in ongoing learning and professional development, improve practice through self-assessment and reflection and monitor developments in practice. These expectations are a part of each fieldwork learning experience. There are various ways that students may enact this competency domain (e.g., student presentation, project or tailored clinical research project). Students are responsible to work with their site and preceptor to determine the most suitable way(s) to demonstrate their ongoing commitment to reflective practice and learning.

For Community Development fieldwork placements, students are generally expected to complete a poster presentation at the annual Community Development Forum. The evaluation of posters is carried out by OT faculty and students are provided with written feedback related to their poster and presentation.

5.4 Feedback

Feedback is essential for student learning while on placement. Optimal development of clinical skills, generic abilities and relevant competencies require ongoing feedback about a student's performance. Preceptors are encouraged to provide feedback regularly and during all aspects of practice, e.g. after a student has carried out an assessment or performed a specific treatment intervention. Feedback is often verbal, but short written feedback can also be used to communicate and track feedback. Feedback becomes more formal when given as part of the mid-placement evaluation and the final evaluation. Feedback can improve confidence and reassure the student that certain skills and behaviours are being done correctly and well or may provide the basis for behaviour change and development of improved skills. Feedback needs to be provided early in the placement to be valuable in providing reassurance and guidance for change. Feedback is also a two-way process whereby the student may provide feedback to the preceptor that will facilitate the learning experience.

5.5 Evaluation and self-evaluation

The Occupational Therapy Fieldwork Assessment in Canada (OTFAC) (Murphy et. al., 2025) is used for assessment of performance during each fieldwork placement. The 6 core competencies of practice captured in the OTFAC are the framework of competencies required to practice as an occupational therapist in Canada (COTC, 2021). A copy of the student evaluation will be sent to the fieldwork site prior to the placement.

A learning objectives document is included with the evaluation package the OTFAC as an additional supplemental document. The learning objectives document assists the student in formulating individual learning objectives for the competencies. The learning contract is developed by the student, in negotiation with the fieldwork educator, based upon the items in the OTFAC, the fieldwork site's student objectives, fieldwork course objectives, his/her own personal learning needs, and areas identified for further growth on previous placements. There is a learning objectives section for each of the six competencies, and by the end of week 1 of the placement block students are expected to formulate one objective for each competency. A reflection on each learning objective will be submitted to the fieldwork coordinator at the end of placement. This will detail if the learning objective was met, what was learned in the competency, areas for improvement etc.

The OTFAC must be completed and signed to evaluate the student on each of the six competency domains and an overall rating at both midterm and final reports. In addition, at mid-term, specific feedback should be provided, including behavioural objectives to be achieved. The minimal score of 3 or 'meets expectations' on all the competency domains is required for a recommendation to "pass" the fieldwork course (refer to Appendix O for competency guidelines for each fieldwork level). To gain skill in self-appraisal, students are required to complete a self-evaluation using the OTFAC at mid-term and final report times. Students are required to discuss their self-assessment with the preceptor. Differences in progress between students and educators often provide fruitful grounds for discussion and help students recognize areas where they are not demonstrating their actual skill or where their skill level is inadequate.

At the end of the fieldwork placement the fieldwork preceptor provides summative comments that identify final comments on the student's overall performance, directions for future learning and a recommendation of either 'pass' or 'fail' for the fieldwork placement. The University Fieldwork Coordinator reviews the completed OTFAC form at the end of the fieldwork course and submits

the grade of pass or fail to the School of Graduate Studies for the student's academic record. If at any time during placement the preceptor believes that the student's communication, knowledge, or clinical skills present a risk to clients the site has the right to withdraw the placement. This would result in an automatic failure of the fieldwork course.

The process of student evaluation is designed to maximize the provision of effective feedback to the student to assist in optimising their learning, as well as to provide the University with periodic grading of the student's performance. For OT846, OT847, OT862, and OT877 fieldwork evaluation documentation takes five forms:

1. **The Occupational Therapy Fieldwork Assessment in Canada (OTFAC)** is completed by the preceptor(s). The scoring on the grading scale should reflect the student's achievement relative to the competency indicators provided in the assessment tool.) . Comments should be included at both midterm and final evaluation. More detailed comments are expected if the student is struggling or where the students' performance exceeds expectations. The inclusion of Next Steps is encouraged to facilitate growth of the student's skills.
2. **The OTFAC Self-Evaluation:** A separate copy of the **OTFAC** is supplied by the student and is completed by the student as a form of self-evaluation. This OTFAC should be referred to frequently throughout the placement as a reminder of the competencies being demonstrated in the placement. This is an important exercise in self-reflection for the student and is most beneficial when students record in writing their feelings about the placement and their assessment of their own performance, strengths and areas needing improvement for each of the performance criteria.
3. **Student Placement Feedback** is to be completed by the student via a Qualtrics survey at both midterm and final. This provides feedback to the preceptor and facility about the learning experience. It should be noted that even if the student has two (or more preceptors) that only one survey is completed per placement.
4. **Learning Objectives & Reflection:** Learning objectives are set during the first week of placement in collaboration with the preceptor. The reflections must be completed at the end of placement. Both are to be uploaded to the students SharePoint folder.
5. **Student verification of placement hours** using the tracking sheet found in the student's shared SharePoint folder. This document is to be updated weekly.

Activities 1-4 above, are completed and discussed by student and preceptor at least twice during the placement: mid-way through the fieldwork placement and at the end of the placement. They can be completed more frequently if student progress, or lack thereof, would indicate the need to do so. Meeting times for feedback and evaluation should be set, and students should be aware of the timing and duration.

Written feedback may be exchanged prior to the mid-term and final evaluation with verbal feedback and discussion taking place during a mid-term and final meetings. This ensures that both the student and the preceptor have had sufficient time to review and process the feedback being provided. The student provides the preceptor with the completed self-evaluation at the

same time as they exchange the other two forms of feedback. In this way, the preceptor's evaluation of the student's performance will not bias the student's self-evaluation or vice-versa.

Training materials on the use of the OTFAC are available via the ACOTUP website.

5.6 Criteria for Assessment

Clinical Fieldwork Placements

The OTFAC is used to evaluate competency development across all fieldwork placements.

The following charts indicate the behavioural expectations across the levels for each of the competency domains. This information is in Appendix L.

Community Development Fieldwork Placements

The expectations for completion of the community development placement include satisfaction of the 185-hour requirement, successful completion of the community development project and a recommendation of a pass on the OTFAC.

5.7 Grading of Fieldwork Placements

Fieldwork placements are graded on a Pass/Fail basis rather than numeric grade. Preceptors grade the student at mid-term and final. At final, the preceptor will make a recommendation to the OT Program as to whether the student should “pass” the placement. The preceptor's recommendation and comments are used as an indicator of student performance. The University Fieldwork Coordinator then makes a recommendation to the Program's Student Progress and Awards Committee as to what grade the student should be awarded. The possible outcomes are Pass (P), In Progress (IN) or Fail (F). IN will be used when the student has not successfully demonstrated the competencies associated with that placement level, but the student has not committed any action that would warrant a failing grade. In this circumstance, the student may be asked to complete additional time at a clinical site.

5.8 Concerns Exist form

The 'Concerns Exist' form should be used and submitted to the University Fieldwork Coordinator if:

- At any point during the placement, there are professional behaviour concerns;
- At any point during the placement the preceptor identifies the student is not meeting competency expectations; and/or
- The preceptor/site or student would benefit from additional support from the OT program or University Fieldwork Coordinator.

The form should be discussed with the student, and the student should be provided with a copy of the form before it is submitted to the University Fieldwork Coordinator. The concerns identified on the form should link to the competency expectations, indicate clearly the expectations for improvement and every effort should be made to ensure the student understands the expectations. Ultimately, the student is responsible to demonstrate their ability to meet competency expectations. Please refer to Appendix O for a copy of the Concerns Exist form.

5.9 Fieldwork Award Nominations

Preceptors are invited to nominate student(s) for a Fieldwork Award based upon exemplary performance during fieldwork. A nomination is appropriate for a student, who based upon the preceptors' experience, consistently exceeds competency expectations. The Fieldwork Award was established by the Physical Therapy Clinic at Queen's University and is presented annually to two graduating occupational therapy students. Students are selected for the award based upon nomination(s) and performance in all fieldwork courses. Nominations are collected through students' program of study and awards are presented at the time of convocation from the MScOT program. The nomination is completed through a Qualtrics survey link provided at the time of placement material distribution. A copy of the form can be found in Appendix P for reference.

There are awards related to Community Development Placements, both for students and for supervisors. A description of these awards can be found in Appendix N.

5.10 Trouble Shooting During Placements

Most concerns that arise during a placement can be easily rectified with a telephone call or email to the University Fieldwork Coordinator.

Some frequently asked questions:

- 1. What should I do when I do not agree with the placement expectations?**
 - Both individuals should review the relevant sections of the Clinical Education Manual and discuss its contents;
 - If the manual does not clarify the issue the University Fieldwork Coordinator should be contacted immediately.
- 2. What if my fieldwork placement (OT846, OT847 or OT877) was originally classified as “physical health” or “physical/mental health”, but the resultant fieldwork placement has focused on “mental health”?**
 - A placement can be reconsidered as meeting the requirement to complete one “mental health” placement in situations where the placement activities were >50% in mental health assessment and/or intervention.
 - A student or preceptor may initiate the process to have a placement considered as meeting the program requirement by contacting the fieldwork coordinator.
- 3. What should I do if I get sick while on placement, or must take a bereavement day?**
 - Students are expected to attend placement for all 300 hours.
 - Any absence due to acute illness greater than 2 days (~15 hours) must be documented with a letter from a physician or nurse practitioner; each day over the initial 2 days must be made up.
 - A student **may** be granted an absence from placement for the death of an immediate family member for up to 2 days (~15 hours). The student is still required to meet the minimum requirement of completing 1000 placement hours to graduate.
 - Absences greater than 2 days due to bereavement should be discussed immediately with the University Fieldwork Coordinator (University policy recognizes absences with respect to ‘immediate family’: grandparents, parents, siblings, children and grandchildren).

- If the student's performance is weak, the preceptor should request that any sick time be made up in a way that is convenient for the preceptor/site;

4. What should I do if I am injured on placement?

For student or client injury, follow the procedures outlined in Section 4.4. The University Fieldwork Coordinator must be contacted immediately. .

5. What do I do if my performance is not meeting the competency expectations?

- The preceptor/student should contact the University Fieldwork Coordinator.
- Difficulties in placement should be identified and addressed early in the placement, if possible before the mid-term evaluation, to give time for remediation.
- The preceptor should consider submission of a '*Concerns Exist*' form.

6. What do I do if I experience harassment while on placement?

- If there is any suspected verbal, physical or sexual harassment of the student or the preceptor during the placement period the University Fieldwork Coordinator must be notified immediately.
- The incident(s) will be documented and, if necessary, followed up by the appropriate individual(s).

5.11 End of Fieldwork Placement

All placement documents must be submitted within 48 hours of completing placement. Guidelines and specific dates will be provided prior to the start of each placement. A delay in the submission of documents may have negative consequences for program progression and/or program completion. Students are required to meet all student deadlines and encouraged to assist their site/preceptor, as needed.

Documentation for Placements

Immediately following the placement, the following documentation must be submitted to the occupational therapy program:

1. Two versions of the Occupational Therapy Fieldwork Assessment in Canada (OTFAC)
 - a. One completed by the preceptor at mid-term and final. This evaluation is submitted by the preceptor directly to the University Fieldwork Coordinator or designate.
 - b. One completed by the student at mid-term and final (self-evaluation process). This self-evaluation is submitted by the student via the students individual SharePoint folder.
2. The Student Placement Feedback Form for mid-term and final. This feedback form is submitted by the student via Qualtrics.
3. Learning Objective & Reflections document submitted to the students SharePoint folder.
4. The student verification of hours form submitted weekly to the students SharePoint folder.

STUDENTS PLEASE NOTE: It is important that you review all components of all forms with your preceptor(s) ensuring that your signature and your preceptor's signature is applied in all

of the appropriate places. Missing signatures and/or missing forms will result in processing delays, including the posting of grades.

Instructions for the submission of all evaluation materials will be provided to students and preceptors prior to the commencement of the fieldwork placement block. Generally, evaluation materials are required to be submitted within 48 hours of the last day of placement.

Evaluation materials must be emailed to otfieldwork@queensu.ca.

5.12 Confidentiality

All student records must remain confidential. Facilities are asked to keep all student records in secured files where only the preceptor, Site Fieldwork Coordinator and/or department manager have access to the files.

Policy on retention or copying of clinical placement performance evaluation materials:

The completed OTFAC is a confidential document of student progress that is the property of the SRT. As such, the original document must be returned to the University Fieldwork Coordinator or designate within 48 hours of the completion of the fieldwork placement and must not be copied for the purpose of retaining on file at the fieldwork site. The student may not give permission to the fieldwork site to make a copy of the evaluation documents at the end of the placement. As a final record of performance in a designated course the OTFAC is comparable to a final examination paper and subject to the same policies.

The *Student Placement Feedback* is completed by the student to provide feedback about the placement to the clinical instructor and facility.

PLEASE NOTE: For learning purposes, students are encouraged to keep photocopies/electronic copies of both from each of their fieldwork placements. All fieldwork evaluation documents will be deleted one (1) year after graduation – and will not be available to students after this time.

6.0 Professional Responsibility

6.1 University Code of Conduct & SRT Professional Behaviour Policy

All students are required to adhere to the University's Code of Conduct and the SRT Professional Behaviour Policy while participating in fieldwork activities.

6.2 Code of Ethics – Occupational Therapy Practice

Occupational therapy students are expected to uphold The Canadian Association of Occupational Therapists (CAOT) *Code of Ethics* (CAOT, 2018) and College of Occupational Therapists of Ontario *Code of Ethics* (COTO, 2020) as outlined by the CAOT and COTO.

“The goal of the [CAOT] Code of Ethics is to achieve and maintain high standards of professional integrity toward clients, colleagues, partners, stakeholders, the public and CAOT. The Code describes expected conduct of all CAOT members in occupational therapy practice, including

those involved in direct service to clients, management, administration, education, research and/or business.” (CAOT, 2018, p. 2).

The CAOT *Code of Ethics* is available at [https://caot.ca/uploaded/web/Code%20of%20Ethics%202007%20-%20Revised%202018_V.3%20\(002\).pdf](https://caot.ca/uploaded/web/Code%20of%20Ethics%202007%20-%20Revised%202018_V.3%20(002).pdf).

Each student is expected to read the CAOT *Code of Ethics* document prior to each fieldwork placement.

According to the College of Occupational Therapists of Ontario (COTO):

Ethical practice defines what is good – which means, what is right. The College expects all practitioners to commit to good practice. This commitment requires occupational therapists to consciously consider what is right in furthering the interests of our clients and what is right in protecting the public interest.

The Code of Ethics—Commitment to Good Practice forms the foundation for occupational therapists’ ethical obligations. It is the framework for the professional and personal conduct expectations outlined in the laws, regulations, College standards and guidelines that govern the practice of occupational therapy. The Code of Ethics articulates the fundamental reference points that guide ethical practice and to which the profession aspires. (COTO, 2020, p.2)

COTO identifies that occupational therapists are guided by two fundamental values **RESPECT** and **TRUST**. The core values underpin the laws, regulations and College Standards and guidelines by which occupational therapists are governed in Ontario (COTO, 2020).

The *Code of Ethics – Commitment to Good Practice* (COTO, 2020) is available at <https://www.coto.org/standards-and-resources/resources/code-of-ethics>. Each student is expected to read the COTO *Code of Ethics* document prior to each fieldwork placement. For any student completing a placement in another province (outside of Ontario) the student should refer to the appropriate regulatory body for information that pertains to practice in that province.

6.3 Agency/Community Code of Ethics

As part of orientation, students are responsible for making themselves aware of (and complying with) codes of conduct or ethical considerations published or communicated by the fieldwork site. This applies to use of site equipment loaned to the student through the course of fieldwork placements. Each student is required to complete and sign the SRT Memorandum of Understanding (MOU) for clinical placements (refer to Appendix Q).

6.4 Confidentiality and the Protection of Personal/Health Information

The well-being of clients is the highest priority. Students must ensure absolute confidentiality of all client/patient information regardless of the source of that information (e.g. patient/client, family, therapist, team member, records or charts). Students are responsible to know and follow the applicable legislation related to confidentiality of personal and/or health information (e.g., Personal Health Information Protection Act (2004), Freedom of Information and Protection of

Privacy Act, R.S.O. 1990, etc.). If a student is in doubt about what information can be disclosed, and to whom, the preceptor, Site Fieldwork Coordinator or University Fieldwork Coordinator should be consulted. Students may be required to sign a declaration of confidentiality at the placement facility. Students are reminded that, as a rule, confidential patient information should never leave the facility property. This includes information in written and electronic form.

Students are required to sign a Statement of Confidentiality (refer to Appendix Q) in their first year of the OT program and prior to participation in any fieldwork placement. This will help to ensure that personal information collected for educational purposes and clinical placements shall be treated as confidential material. Each student shall be expected to ensure respect for and demonstrate integrity where all such confidential information is concerned. Any breach shall be addressed through the SRT *Professional Behaviour Policy* (<https://rehab.queensu.ca/academic-programs/policies/professionalism>).

6.5 Attendance

Full time attendance at fieldwork placements is mandatory. **The University Fieldwork Coordinator must be notified of any absence.**

6.6 Professional Image

The personal appearance of a student carries a non-verbal message to the client, their family, and the staff. Students will follow the policies and procedures on dress code and general conduct specific to the practice setting. Common sense and discretion should be used to dress neatly and portray a professional image. These guidelines apply to clinical experiences occurring within the academic block as well as for all fieldwork placements.

General guidelines for dress include:

- Clean clothes daily
- A lab coat or "scrubs" may be needed on occasion (or in some settings) for sanitary purposes
- Well-groomed hair (i.e. long hair tied back)
- Facial hair on men should be neat and well-groomed
- Discretion consistent with the environment for body-piercings and/or body art (tattoos) (e.g. in some cases temporary removal of a piercing or coverage of tattoo(s) may be appropriate)
- Skin should not show as you bend, reach or lift or twist
- Revealing clothing or undergarments should not be seen
- Fingernails should be clean and short for client/patient care and universal precautions

Shoes:

- Rubber/non-slip soled for safety
- Appropriate for the setting/environment (e.g. no outdoor footwear in home or clinic type settings)
- Closed toed, closed heeled (occupational health and safety regulation) and low/no heel

Shirts:

- Of sufficient length or tucked into skirt or pants (NO bare midriff)
- Collars and short or long sleeves preferred (NOT sleeveless)

Pants/Skirts:

- Business casual pants are appropriate (e.g. khakis that are wrinkle resistant or ironed)
- No jeans, shorts or casual pants (pants must be crease resistant and/or ironed)
- No active/yoga wear
- Generally, skirts should be no more than 2" above the kneecap

Accessories/Other:

- Jewellery should not interfere with or detract from patient/client interactions (i.e. preferably limited to wedding/engagement rings and stud or small hoop earrings)
- A watch with a second hand or digital readout is highly recommended
- Nametags (purchased through the SRT) must be worn stating that you are a Queen's Occupational Therapy Student
- No perfumes and scented products

7.0 Academic Regulations

For full details of current Academic Regulations please refer to the School of Rehabilitation Therapy website at www.rehab.queensu.ca.

Each of the required fieldwork courses carries a university course credit weighting and therefore university academic regulations apply.

Any circumstances that, in the opinion of the student or the preceptor, may adversely influence the student's performance in a placement should be brought to the attention of the University Fieldwork Coordinator or the Associate Director, Occupational Therapy Program as soon as the circumstances in question are known. Whenever possible this should be brought forward and documented prior to completion of the placement.

7.1 Standing

- Clinical placements are graded on a Pass/Fail basis.
- Preceptors grade student performance at mid-term and final, using the appropriate fieldwork evaluation.

IMPORTANT NOTE: Any fieldwork placement may be terminated at any time during the placement, if in the opinion of the preceptor the student's presence on placement would negatively impact patient safety or patient care.

The COTO Standards for the Supervision of Students states that, "in assuming the role of student supervisor, the OT remains fully accountable and responsible for the quality of care provided to clients" (COTO, 2023). The Standard is available at <https://www.coto.org/standards-and-resources/resources/standard-for-the-supervision-of-students-and-occupational-therapy-assistants-2023>

Upon completion of each fieldwork placement, the student's preceptor is asked to make a recommendation to the Program for a grade of Pass, Incomplete, or Fail. If the preceptor does not make a recommendation, or if they provide feedback to the Program that indicates the student's performance may not warrant a Pass grade, the University Fieldwork Coordinator or

delegate will consider all available evidence and will make a recommendation to the Program's Student Progress and Awards Committee as to what grade the student should be awarded. The possible outcomes are Pass (P), Incomplete (IN) or Fail (F). IN may be used when the student has not successfully demonstrated the competencies associated with that placement level, but the student has not committed any action that would warrant a failing grade.

7.2 Student Withdrawal from Placement

Any student who intends to withdraw from a placement must notify the University Fieldwork Coordinator immediately. All decisions about academic progression and grades following a withdrawal are the discretion of the Occupational Therapy Student Progress and Awards Committee.

7.3 Academic Decisions/Failure/Withdrawal on Academic Grounds

In a case in which a preceptor recommends that a student be assigned a failure or incomplete, the Occupational Therapy Student Progress and Awards Committee will normally uphold the preceptor's recommendation. If there are extenuating circumstances well-documented and sufficient to excuse inadequate performance, the OT Program may recommend that the student be allowed to repeat the course.

In keeping with the General Regulations of the School of Graduate Studies and Postdoctoral Affairs (SGSPA), unsatisfactory performance by the student during the program may cause proceedings to be instituted requiring the student to withdraw.

Any student who wishes to appeal the academic decisions of the OT program, the SRT or any of its instructors is strongly recommended to consult the SGSPA's policy on Appeals Against Academic Decisions (<https://www.queensu.ca/academic-calendar/graduate-studies/general-regulations/>).

8.0 References

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9.0 Appendices

A	MScOT Academic Course Descriptions
B	Occupational Therapy Fieldwork Levels
C	CGFEOT & FS-PRO
D	Standards for the Supervision of Students
E	SRT Affiliation Agreement
F	Canadian Association of Occupational Therapists (CAOT) Code of Ethics
G	International Fieldwork Resources
H	Pre-placement information and forms
I	WSIB Student Declaration of Understanding
J	Learning Objectives
K	Passport to Fieldwork Education
L	OTFAC Example Indicators for Levels 1-4
M	Student Placement Feedback Form (Clinical Placements and Community Development)
N	Community Development Award Descriptions
O	Concerns Exist Form
P	Fieldwork Award Nomination Form
Q	Memorandum of Understanding and Statement of Confidentiality

OCCUPATIONAL THERAPY (OT)

Course credit units are as shown in each course description.

OT 801 Conceptual Models in Occupational Therapy

This course introduces students to the central construct of occupation and to both the consequences and determinants of occupation. We will explore the most prominent theoretical models for understanding the relationship between occupation and health, and the factors that affect occupation. The course also covers the historical development of occupational therapy theory, and key theorists over the past 100 years. (4.0 credit units)

OT 802 Models of Practice in Occupational Therapy

This course introduces students to occupational therapy interventions, processes of change, and tools for being an occupational therapist. In addition, students will apply occupational therapy theory to practice situations. (2.0 credit units)

OT 823 Disability Theory

This course introduces the concepts of disability, citizenship and societal participation. Conceptual frameworks of disability and issues and implications of disability will be discussed along with Canadian health and social policies relating to people with disabilities. (1.5 credit units)

OT 824 Culture, Equity and Justice

This course will guide students to explore effects of power and privilege on occupational participation and connect historical context to present day to envision a more just, equitable future. Students will examine biases and positionality to understand their role in creating systems and structures that enable, constrain and/or oppress occupations (3 credits).

OT 825 Lived Experience

In this fieldwork course, pairs of first-year students meet with a volunteer from the Kingston community who identifies as having a health condition that contributes to experiences of disablement. The goal of this unique learning relationship is to improve students' understanding of disability and facilitate their embracing the concept of client-centred practice whereby a client's life experiences are acknowledged, and they become partners in the occupational therapy process. (1.5 credit units)

OT 826 Enabling Occupation in Children and Youth

This course provides students with the foundational knowledge to identify factors influencing performance and participation for children and adolescents. Evaluation and intervention approaches at the level of impairment, activity limitations, and participation restrictions will be explored

by considering the context of service provision systems and the diverse roles of Occupational Therapy practitioners in collaboration with families and inter-professional service providers. (Lecture + lab) (4 credit units)

PREREQUISITES: OT 881, OT 882, OT 883, & OT 884

OT 827 Enabling Occupation in Older Adults

This course provides students with the foundational knowledge necessary to identify factors influencing performance and participation of older adults. Evaluation and intervention approaches at the level of impairment, activity limitation, and participation will be explored by considering the diverse roles of occupational therapy practitioners in collaboration with families and inter-professional service providers across a range of service provision contexts. (3.0 credit units)

OT 846 Occupational Therapy Fieldwork I

This fieldwork course, completed continuously and offered in a practice setting, will allow the student to focus on generic assessment skills, developing communication skills and application of OT knowledge to the practice setting. (8.0 credit units)

PREREQUISITES: OT- 825 and OT -851 or permission of the course coordinator.

OT 847 Occupational Therapy Fieldwork II

This fieldwork course, completed continuously and offered in a practice setting, will allow students increased independence in working with clients including assessment, intervention and application of OT knowledge. (8.0 credit units)

PREREQUISITES: OT- 846 or permission of the course coordinator.

OT 851 Client-Centred Communication

This course focuses on the development of communication skills within the context of client-centred occupational therapy practice. The critical elements of the therapeutic relationship will be developed through interviewing and assessment strategies. This course will make extensive use of supervised videotaping, and interaction with community volunteers through the Clinical Education Centre. In addition, students will gain experience in professional communication skills. (4.0 credit units).



OT 852 Group Theory and Process

This course will examine group theory, process and application to occupational therapy practice. It will focus on groups both as a means to enabling occupational therapy change and as a means for working effectively in a complex health care system. Laboratory sessions will facilitate the development of effective techniques in group leadership and participation. (3.0 credit units)

PREREQUISITES: OT 851 or permission of the course coordinator.

OT 853 Coaching and Counseling for Occupational Change

This half course consists of both theoretical background preparation and practical experiential learning opportunities to introduce occupational therapy students to selected talk-based interventions available for enabling occupational fulfillment and change (coaching, counseling and psychotherapy). (3.0 credit units)

PREREQUISITES: OT 851 or permission of the course coordinator

OT 861 Community Development in Occupational Therapy

This course critically examines the theoretical foundations and processes of working with communities through community development in order to enable occupation at the community level. Theories of community development, the process of engaging with communities, and skills required for community development will be explored as they pertain to occupational therapy. This course lays the theoretical foundation for the community development fieldwork placement, OT 862. (3.0 credit units)

PREREQUISITES: OT 842, OT 851, and OT 852 or permission of the course coordinator.

CO-REQUISITE: OT 862 or permission of the course coordinator.

OT 862 Applied Community Development

This fieldwork course, completed continuously, will provide the opportunity for students to explore the process of working with communities to enable occupation and to create inclusive communities and environments. (6.0 credit units)

PREREQUISITES: OT 847 or permission of the course coordinator.

OT 871 Advanced Clinical Reasoning

This course provides opportunities for students to develop advanced clinical reasoning skills applicable to all areas of occupational therapy practice. Based on the occupational

therapy process, students will develop skills of critical thinking and inquiry. (3.0 credit units)

PREREQUISITES: all first-year courses and all second-year, fall-term courses or permission of the course coordinator.

OT 875 Advanced Professional Practice

This course is designed to provide students with opportunities to acquire an advanced understanding of the roles, rights and responsibilities incumbent with becoming an Occupational Therapist. Particular attention will be given to the legal and ethical parameters of practice, professional contributions and responsibilities within complex and changing environments and career development as advanced healthcare professionals. Course content is designed to be responsive to the shifting practice environment and offer students an opportunity to synthesize learning from other courses within the curriculum. (3.0 credit units)

PREREQUISITES: all first-year courses or permission of the course coordinator.

OT 877 Occupational Therapy Fieldwork III

This fieldwork course, completed continuously and offered in a practice setting, will allow students to consolidate OT knowledge and skills. The focus of this final fieldwork placement is for the student to maximize independence in the areas of assessment, intervention, programming and evaluation. (8.0 credit units)

PREREQUISITES: OT 847 or permission of the course coordinator.

OT 881 Physical Determinants of Occupation I

This course introduces students to human occupation from the perspective of its anatomical, physiological and biomechanical dimensions. The course will use an integrated case study format to develop understanding of movement of the human body as it relates to occupation. The course will focus on the assessment methods used in physical rehabilitation and introduce musculoskeletal conditions as they relate to occupation. Theoretical frameworks and evidence-informed practice approaches and interventions will be addressed in class and weekly lab sessions. (4.0 credit units)

OT 882 Psychosocial Determinants of Occupation I

This course introduces students to human occupation from the perspective of its psychological, emotional and social dimensions. This course will use a case study format to develop understanding of the person-level foundations and environmental conditions that enable occupational performance and are relevant to psychosocial practice. Theoretical frameworks and evidence-informed practice approaches and interventions will be addressed in class and weekly lab sessions. (3.0 credit units)

OT 883 Cognitive-Neurological Determinants of Occupation I

This course emphasizes the neuro-physiological organization of motor behaviour, sensory-motor integration, and the dynamic nature of the central nervous system and will provide a foundation for evaluating occupational performance with a focus on evaluation and intervention approaches for cognitive-perceptual and motor control problems for adults at three levels: impairment, strategy and function. Attention will be given to secondary motor performance problems. (4.0 credit units)
PREREQUISITE: OT 881

OT 884 Psychosocial Determinants of Occupation II

This course builds on attitudes, knowledge and skills developed in psychosocial dimensions of occupation I. Students will learn theoretical frameworks, practice approaches and evidence-informed interventions relevant to complex psychosocial issues within a range of specific occupational therapy practice contexts. Weekly labs will provide the opportunity for further skill development. (4.0 credit units)
PREREQUISITE: OT 882

OT 885 Physical Determinants of Occupation II

This course analyzes human occupation from the perspective of its anatomical, physiological and biomechanical dimensions. The course will focus on intervention methods used in physical rehabilitation to enable occupation in musculoskeletal conditions. The course is designed to build on concepts introduced in OT881 and will use an integrated case study format to further develop an understanding of movement of the human body as it relates to occupation. Theoretical frameworks and evidence-informed practice approaches and interventions will be addressed in class and weekly lab sessions. (3.0 credit units)
PREREQUISITE: OT 881

OT 886 Environmental Determinants of Occupation I

This course provides students with foundational knowledge about environmental factors influencing occupational performance and participation in occupations. First, we examine the physical, social and institutional environments and occupational therapy approaches for assessment and intervention. Then we explore various contexts across the lifespan, including home, school, work, and community. (3.0 credit units)
PREREQUISITES: OT- 823, OT- 881, and OT -882 or permission of the course coordinator.
EXCLUSION: OT- 842

OT 887 Environmental Determinants of Occupation II

This course builds on knowledge and skills developed in Environmental Determinants of Occupation I (OT 886).

Students will learn assessment approaches and evidence-informed interventions relevant to environmental issues and assistive technology within a range of diverse occupational therapy practice contexts, including inter-professional collaboration. (3.0 credit units)
PREREQUISITES: OT- 886 or permission of the course coordinator; OT- 826; OT- 827
EXCLUSION: OT- 842

OT 889 Cognitive-Neurological Determinants of Occupation II

This course builds on attitudes, knowledge and skills developed in Cognitive-Neurological Dimensions of Occupation I. Students will practice evaluations, and evidence-informed interventions relevant to complex cognitive-neurological issues within a range of neurological impairments in adults. Weekly labs will provide the opportunity for further skill development. (3.0 credit units)
PREREQUISITE: OT 883

OT 897 Critical Enquiry Foundations

This course prepares students for the completion of OT 898 by examining world views, research designs, criteria for study quality, and evidence-based practice. Students develop skills to pose clinical questions, systematically search the literature, appraise scientific articles, and use research to inform rehabilitation practice. (3.0 credit units)
PREREQUISITE: Registration in the occupational therapy program.

OT 898 Critical Enquiry Project

Students will work with a faculty supervisor to complete a critical enquiry project. The project will enable students to apply critical inquiry skills by participation in an area of clinical investigation and to examine the relevance of findings to clinical practice. (6.0 credit units)
PREREQUISITE: OT 897 or permission of the course coordinator.

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Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT)

Guiding Principles, Responsibilities and
Continuous Quality Improvement Process

Presented by the

Committee on University Fieldwork Education
(CUFE)
Association of Canadian Occupational Therapy University Programs
(ACOTUP)

Approved by CUFE and ACOTUP
Summer 2003, Revised 2005, 2011, 2024

Table of Contents

Introduction.....	3
Section 1: Principles Guiding the Canadian Occupational Therapy Fieldwork Experience .	4
Section 2: Responsibilities of Fieldwork Education Partners	5
Section 3: Tools and Processes to Support Quality in Canadian University Occupational Therapy Fieldwork Education	8
Appendix A: Clarifying the Definition of Fieldwork in Canadian Occupational Therapy Education.....	10
Appendix B: Examples of Fieldwork Site Profile Form.....	20
Appendix C: Example of a Student Site Evaluation Form.....	32

Introduction

The Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT) was developed by the Committee of University Fieldwork Educators (CUFE) of the Association of Canadian Occupational Therapy University Programs (ACOTUP) and continues to be monitored and reviewed by the committee.

The purpose of the CGFEOT is to provide a national resource to guide both university programs and fieldwork partners in developing appropriate and effective fieldwork learning experiences for students. This shared vision for fieldwork education is critical to promote quality and accountability, and reflect current best practice in fieldwork education across Canada.

CUFE has reviewed and updated the CGFEOT to reflect the core competencies of occupational therapy in Canada, changes in health care environments and the evolution of occupational therapy practice. The review has incorporated input from ongoing communications with fieldwork partners, reviews of national and international documents and most recently, from the CUFE subcommittee that formed to clarify the definition of fieldwork in Canadian Occupational Therapy Education. (See Appendix A)

Foundational to the CGFEOT are the WFOT Minimum Standards for the Education of Occupational Therapists (WFOT 2016) which states that the purpose of fieldwork (or practice education) “is for students to integrate knowledge, professional reasoning and professional behaviour within practice, and to develop knowledge, skills and attitudes to the level of competence required of qualifying occupational therapists.”

CUFE acknowledges and values the commitment of all its fieldwork partners in continuing to support high quality fieldwork education in Canada.

Section 1 of the guidelines includes principles to promote optimum fieldwork education.

Section 2 presents the responsibilities of the main fieldwork education partners: students, preceptors and university programs.

Section 3 proposes tools and processes for supporting quality in fieldwork education.

Section 1: Principles Guiding the Canadian Occupational Therapy Fieldwork Experience

These guidelines are intended to ensure that each Canadian occupational therapy fieldwork experience provides excellent learning opportunities and resources, and an optimum environment for learning. Students acquire abilities and professional behaviors as well as new knowledge while engaged in fieldwork education. Students, preceptors (fieldwork educators), onsite fieldwork coordinators, university professors and university fieldwork coordinators are expected to collaborate in linking fieldwork experiences to what students have learned in the university setting. Therefore, it is important to share a common vision for fieldwork education.

The fieldwork experience should:

- Be a collaborative learning experience among students, clients, fieldwork educators, onsite fieldwork coordinators and university programs;
- Be mutually beneficial to students and fieldwork educators;
- Be accepted as an essential part of professional growth for both students and fieldwork educators and fieldwork site;
- Occur in a positive learning environment;
- Consider students' learning objectives in relation to their professional development within the context of the fieldwork environment;
- Support students to account for their learning;
- Enable students to link theory with practice;
- Enable students to take an active role within the site;
- Promote satisfaction for both students and fieldwork educators regarding the fieldwork experience;
- Occur anywhere the roles and functions of an occupational therapist can be developed and integrated.

Section 2: Responsibilities of Fieldwork Education Partners

Students are expected to:

- Develop competencies for the application of the occupational therapy process;
- Take responsibility for their learning experience and the direction of that experience in partnership with fieldwork educators, onsite fieldwork coordinators, university professors and university fieldwork coordinators;
- Uphold legal standards and the Codes of Ethics at all times (CAOT, professional regulatory body, fieldwork site, university program);
- Comply with site and university policies and procedures;
- Increase their understanding of and promote the roles and functions of occupational therapists;
- Learn how occupational therapists contribute to the service delivery team;
- Increase their understanding of the systems in which occupational therapists practice;
- Increase their understanding of and respect the roles and functions of other team members;
- Develop confidence and competence in their practice of occupational therapy;
- Set personal and professional goals before the beginning of the fieldwork experience. Review and adjust them throughout the placement;
- Complete all necessary required learning before and during the fieldwork experience including readings and other forms of learning activities (e.g., online modules, trainings, reviewing lectures...);
- Uphold the workplace readiness standards required of a healthcare professional before and during their fieldwork experience (e.g., respect the site dress code, use of professional communication in person, with the use of a cell phone and online/via email);
- Communicate with the university fieldwork coordinator/professor any time during their fieldwork experience if they encounter challenges in developing their competency profile;
- Provide feedback to their fieldwork educator based on their fieldwork learning experience.
- Provide feedback and submit an evaluation of their fieldwork experience to their university fieldwork professor/ coordinator following each placement.

Fieldwork educators are expected to:

- Act as role models for students;
- Become familiar with the university fieldwork education program (learning objectives, educational tools, fieldwork evaluation tool, expected student performance in accordance with learner's placement level) and with the supervision process;
- Offer a welcoming environment, a comprehensive orientation and provide space for student use, as available within the site's resources;

- Clearly inform students of what is expected of them, appropriately scaffold responsibilities and expectations and be available to students to offer appropriate supervision;
- Model a processes of critical self-reflection and clinical reasoning, while making a space for students to do the same;
- Offer regular and timely feedback based on student performance, including recommendations for improvement;
- Offer a positive and comprehensive learning environment to enable student development within the core competencies required for occupational therapy practice;
- Assist students to develop a good understanding of their professional growth with respect to core competencies as described in the *Competencies for Occupational Therapists in Canada 2021* (CAOT, 2021) by allowing and promoting time for guided reflection;
- Meet with students to discuss and evaluate their performance at the mid-term and end of the fieldwork education experience;
- Communicate with the university fieldwork coordinator/professor at any time during the placement if the student encounters significant challenges;
- Provide to university fieldwork coordinator/professor a current fieldwork site profile describing learning opportunities and resources;
- Provide feedback with respect to their experience as fieldwork educator (student preparedness, impact of the supervisory experience, administrative support availability, evaluation of pedagogical needs, etc.) according to the university programs' process (e.g. questionnaire, program evaluation focus group, webinar,...).

University fieldwork coordinators/faculty are expected to:

- Support students to develop a good understanding of their professional growth with respect to core competencies as described in the *Competencies for Occupational Therapists in Canada 2021* (CAOT, 2021) by providing fieldwork preparation (e.g. orientation and resources) and debriefing sessions (e.g. integration of theory with practice) to students;
- Support fieldwork educators with orientation and educational resources related to the university academic and fieldwork education programs and the supervision process;
- Recruit and coordinate fieldwork opportunities, while striving to assign students to teaching sites according to students' university and fieldwork profiles and personal interests and requests;
- Support students to make suitable choices with regard to establishing a varied fieldwork education profile (clienteles and fieldwork settings) to be eligible for licensure;
- Offer ongoing support and problem solving to students and fieldwork educators in dealing with teaching-learning challenges;
- Complete data management related to student fieldwork experiences, fieldwork educators and teaching sites to assist in analysis of quality fieldwork opportunities and experiences;

- Recognize fieldwork partners who contribute time and expertise in educating students;
- Work with teaching sites to negotiate a fieldwork agreement, either temporary or long term, describing the liability and responsibilities of each party, as well as any pre-fieldwork requirements;
- Ensure students are provided with appropriate liability coverage and work site insurance;
- Regularly assess the content and quality of supervision given and provide recommendations to fieldwork sites and feedback to fieldwork educators.
- Regularly assess the content and quality of the environment in which the placement occurs to ensure appropriate resources are available to support a positive learning environment and provide recommendations to fieldwork sites.

Section 3: Tools and Processes to Support Quality in Canadian University Occupational Therapy Fieldwork Education

To support the quality of Canadian occupational therapy fieldwork education, the following tools and processes are **recommended**:

1. The university fieldwork coordinator is recommended to provide each site with a fieldwork site profile form to complete. The aim of this profile is to provide important information to the university which enables an understanding of the student learning experience within the site. It also helps to ensure quality teaching sites and gives students information prior to their placement with the intention to improve the learning experience. The following list describes suggested information to be provided:

- Site name and contact information
- Characteristics of occupational therapy services provided (area of practice, patient characteristics such as age/diagnosis, specialized programs, interdisciplinary team members, non-conventional or community setting...)
- Site requirements (e.g. car...) and specific prerequisites (e.g. CRC)
- Learning opportunities and resources (IT/library access, specialized training...)
- Amenities (e.g. parking on site)
- Approval by a Site Representative

University programs can use their own personalized method of collecting this information that meets their needs and their institutions' needs. A fillable pdf is recommended and can be filled out by the site contact or facilitated by the university fieldwork coordinator. The form can also be filled out by the site's first student and verified by site contact. Or an e-survey can also be used. Two examples of Fieldwork Site Profile forms are outlined in appendix B and may be used for this purpose if the university so chooses.

2. Following each fieldwork placement, it is recommended that students be given the opportunity to provide feedback. University programs can use their own personalized method of collecting this feedback that meets their needs and their institutions' needs. One example is the use of a fieldwork site feedback evaluation form. The aim of this evaluation process is to gain an understanding of how the student's learning experience at the site contributed to

his or her professional development. An example of a student fieldwork site evaluation forms is outlined in appendix C and may be used for this purpose if the university so chooses.

3. Considering the important formative role assumed by preceptors, universities must support preceptor professional development as related to fieldwork education. It is strongly recommended that the university fieldwork coordinator/professor collect and analyze preceptor feedback. How this feedback is collected is up to the University (e.g. feedback form, advisory committee, individual meetings...)

4. On a regular basis (to be determined by the university), the university fieldwork coordinator should review the documents pertaining to particular fieldwork sites: the fieldwork site profile, the relevant student fieldwork site evaluation forms, and the relevant preceptor feedback. It is recommended that the university fieldwork coordinator shares a summary with their fieldwork sites at minimum every 5 years.

5. If issues related to teaching and learning with a fieldwork site arise, the university fieldwork coordinator, in conjunction with the fieldwork site, will propose a plan with measurable outputs and timelines for improving or optimizing the student learning opportunities.

6. Depending upon specific needs and programs developed, it is anticipated that each university will be responsible for designing and implementing additional quality improvement measures that are deemed appropriate for their region and context (e.g. ensuring sites are inclusive and can adapt to different student needs and accommodations).

Appendix A: Clarifying the Definition of Fieldwork in Canadian Occupational Therapy Education

CUFE Sub-Committee on Clarifying the Definition of Fieldwork

July 2021; Updated May 2022; Finalized November 2022

Executive Summary:

Starting in March 2020, the COVID-19 pandemic began to affect health care, education and social services across Canada, thereby impacting fieldwork opportunities (clinical education, practice placements) for occupational therapy (OT) students. The ACOTUP Board of Directors encouraged CUFE to examine whether fieldwork placements being used in the new pandemic reality were still reflective of the existing definition of fieldwork. A subcommittee of CUFE reviewed accreditation, WFOT documents and other fieldwork literature. They concluded that these foundational documents continue to support the creative and innovation strategies currently being used by Canadian OT education programs for fieldwork placements.

Background & Introduction:

When the COVID-19 pandemic began in March 2020, many health care and social services across Canada were immediately refocused and restricted and, as a result, fieldwork opportunities for occupational therapy students were significantly impacted. In many situations/regions, fieldwork placements that were planned or in progress were immediately interrupted, cancelled or postponed. In order to ensure students were able to meet fieldwork requirements for graduation, fieldwork coordinators at the various Canadian programs had to necessarily look broadly and creatively at (re)new(ed) fieldwork opportunities that would continue to meet the definition and purpose of practice education but be flexible enough to occur within, and accommodate the realities of, pandemic practice circumstances. This caused an increase in the use of legitimate but 'non-conventional' fieldwork placements during the remainder of 2020 and during 2021 to date.

Notably:

- The number of placements using virtual supervision increased significantly. That reality has been associated with many conventional and non-conventional placements during the pandemic time period but is not the primary focus of this statement.
- The number of placement services/settings engaging in virtual service provision (aka: tele-rehabilitation) also increased dramatically which mirrored a similar increase in the use of tele-rehabilitation in the profession in general. Many of the OT services which were typically in-person transitioned to online delivery during this period.

In order to ensure that all involved in fieldwork placements nationally are fully informed of the definition of occupational therapy fieldwork, ACOTUP encouraged CUFE to strike a sub-committee (established January 2021). The sub-committee's purpose was to review and clarify if the pandemic-impacted placements being used adhered to and aligned with the existing, evidence-based definition of fieldwork for Canadian occupational therapy education..

The CUFE sub-committee met between January-July 2021. International and national documents, including minimum accreditation standards, as well as publications related to 'non-conventional' fieldwork placements were thoroughly reviewed and referenced to create the following summary regarding the definition of fieldwork in Canadian occupational therapy education.

The World Federation of Occupational Therapy (WFOT, 2016) explicitly sets the minimum standard for practice education (aka: practice placements, fieldwork, clinical education). The COVID-19 and WFOT Minimum Education Standards Statement published in March 2020, in response to the emergence of the pandemic, also clearly stated:

A dynamic and flexible approach to how the 1000 hours is achieved has always been the intent of the Minimum Standards (WFOT 2020, p. 2).

Definition & Purpose of Fieldwork:

'Practice placements' are defined by the WFOT (2016) as:

... the time students spend interpreting specific person-occupation-environment relationships and their relationship to health and well-being, establishing and evaluating therapeutic and professional relationships, implementing an occupational therapy process (or some aspect of it), demonstrating professional reasoning and behaviours, and generating or using knowledge of the contexts of professional practice with and for real live people**. (p. 71)*

*The purpose of practice education is for students to integrate knowledge, professional reasoning and professional behaviour within practice, and to develop knowledge, skills and attitudes to the level of competence required of qualifying occupational therapists. Students experience a range of practice education that requires them to integrate knowledge, skills and attitudes to practice with a range of different people*** who have different needs, and in different contexts. (WFOT, 2016, p. 48)*

*The 'and for' includes occupational therapy service and consultation provided to organizations and communities.

**Simulated practice activities used within fieldwork are completed with 'real live people' represented by actors portraying standardized patient scenarios. As per WFOT (2020): *"Many education programmes use role play and simulation as a form of practice education. Other teaching strategies include problem-based case study work, video assessments and in-depth, evidence informed reflective practice."*

***Fieldwork placements are a part of the occupational therapy services provided to clients including individuals, families, groups, communities, organisations and populations (WFOT, 2010).

Standards for Fieldwork Placements:

The WFOT (2016) requires that all occupational therapy students complete a minimum of 1000 practice placement hours which position the student to be actively involved in *"implementing an occupational therapy process, or an aspect of an occupational therapy process involving human interaction with person or persons as client (individual, family, group or community to business, institution, agency or government)"* (p. 49).

The WFOT (2016) further provides direction that any one OT student's experience during their 1000 hours of practice education must contain a range of experiences (p. 46):

- *People of different age groups*
- *People who have recently acquired and/or long-standing health needs*
- *Interventions that focus on the person, the occupation, and the environment.*

And that the breadth of experience obtained by a single student during 1000 hours of fieldwork should normally include at least three of the following parameters (p. 46):

- *A range of personal factors such as gender and ethnicity that is reflective of the [Canadian] population that will be recipients of occupational therapy*
- *Individual, community/group and population approaches*
- *Health conditions that affect different aspects of body structure and function and that cause different kinds of activity limitations*
- *Different delivery systems such as hospital and community, public and private, health and educational, urban and rural, local and international*
- *Pre-work assessment, work re-entry, career change*
- *Existing and emerging services, such as services being developing for and with people who are under-employed, disempowered, dispossessed or socially challenging; organisations and industries that may benefit from occupational therapy expertise; or arts and cultural services*
- *Settings where there are currently no occupational therapists employed.*

Within our Canadian jurisdiction, the Canadian Association of Occupational Therapist (CAOT, 2019) Academic Accreditation Standards and Self-Study Guide are derived from *“the Minimum Standards for the Education of Occupational Therapists (WFOT, 2016) and a review of current best-practice in accreditation as well as current and future trends in education and professional practice (p. 3)”*. These CAOT standards very simply and broadly note the following necessities:

- *Fieldwork education includes a minimum of 1000 supervised hours.*(Standard 2.74 p. 17)
- *The fieldwork component demonstrates that students acquire a range of experiences.* (Standard 2.76 p. 18)
- *Each student’s fieldwork hours are supervised by an occupational therapist.* (Standard 2.712 p. 19).

The Canadian Guidelines for Fieldwork Education in Occupational Therapy (ACOTUP, 2011) further note that *“the fieldwork experience should occur anywhere the roles and functions of an occupational therapist can be developed and integrated”* (p. 4). Until November 2021, those roles were defined by the Profile of Practice of Occupational Therapy in Canada (CAOT, 2016): *The role of Expert in Enabling Occupation draws on the competencies included in the roles of Communicator, Collaborator, Practice Manager, Change Agent, Scholarly Practitioner, and Professional* (p. 2). In December 2021, the newly released Competencies for Occupational Therapists in Canada (ACOTRO, ACOTUP, & CAOT, 2021) replaced the Profile and merged with the previous national essential competencies document to outline six domains of occupational therapy competencies: A) Occupational Therapy Expertise, B) Communication and Collaboration, C) Culture, Equity and Justice, D) Excellence in Practice, E) Professional Responsibility, and F) Engagement with the Profession (p. 9).

Specifically in relation to pandemic circumstances, the WFOT (2020) acknowledged that *“the pandemic has required occupational therapists to develop new and innovative mechanisms for the delivery of services”* (p. 1). By extension, this ‘reality’ permits fieldwork placements to follow suit and similarly occur using new and innovative mechanisms of service delivery.

The WFOT (2016; 2020) also provides additional detailed information and standards re:

- Placement duration and distribution within the overall curriculum (p 49):
 - *Practice placements are of sufficient duration to allow integration of theory to practice. The range of placement length will depend on the specific program and its context.*
 - *Practice placements can be distributed throughout every year of the curriculum as suitable for the culture and context.*

- Supervision of practice placements by regulated occupational therapists (p 50):
 - *Practice placements are guided by learning objectives and supervised and assessed by an occupational therapist. There is no requirement for the supervisor to be on site ... supervision refers to the process of overseeing the student's implementation of an occupational therapy process, where the [OT] supervisor is responsible for the quality of the student's practice and for the safety of the recipient of occupational therapy.*
 - *It is expected that supervision will include:*
 - *Discussion*
 - *Collaborative development of learning objectives*
 - *Review of the student's intervention plans and documentation*
 - *On-going monitoring and evaluation of student/students' performance*
 - *Completion of final assessment including identification of future learning needs.*
 - *The amount and frequency of supervision will progress from close, on-site supervision to independent practice as student's progress through the programme. The level of supervision will also vary with students' knowledge base, familiarity with the practice setting and their learning needs; the contexts of practice - including the presence or absence of other health professionals; the complexity of the occupational therapy intervention to be provided and the level of proficiency required for it to be effective; and the safety risks for both students and recipients of occupational therapy.*

Non-Conventional Placements:

To meet these standards, fieldwork can take many forms. Historically, in our Canadian context, conventional**** placements are those placements occurring where OTs are commonly and currently employed part-time or full-time, including but not limited to front-line 'clinical' health and social service, industry and educational milieus. By contrast, 'non-conventional' placements typically occur outside, or as an expansion of, the established front-line OT practice in a given region. For several decades, we had already seen an increase in these types of placements in the Canadian context (Bossers, Clark, Polatajko & Laine, 1997).

In our Canadian context, non-conventional placements have begun to be categorized/grouped by some programs as LEAP placements (Barker & Duncan, 2020) because many are focused on Leadership, Emerging practice (or expanding scope of practice), Advocacy (or administration) and Program planning (or projects). However, the names/types and the extent of use of these non-conventional placements vary between programs and can include but are not necessary limited to:

- Leadership/administrative/managerial roles, program planning, projects and initiatives, including policy development and advocacy
- Role-emerging/role-enhancing/role-expanding OT service provision
- Alternative models of supervision, including on-site interprofessional supervision as long as a sufficient amount of OT supervision occurs for the given context and

nature/scope of practice and individualized evaluation of student applied OT practice competencies occurs

- Student-led, site-facing, occupation-focused projects involving knowledge application & translation and/or program development & evaluation in partnership and alignment with the needs of clinical sites/services and/or community organizations and/or industry, as long as individualized evaluation of student applied practice competencies occurs by a registered occupational therapist (ie: not an evaluation of the project outcome itself).
- Simulation, as long as it is “*delivered with immediacy to interaction with a real client (who may be portrayed by a standardized patient) and to occupational therapy practice education/fieldwork placements*” (OTCA 2020) and includes an individualized evaluation of student applied practice competencies by a registered occupational therapist

There is clear direction provided by the WFOT (2016) regarding the need for and use of non-conventional placements and, amidst fluctuating and evolving pandemic practice circumstances, the WFOT (2020) statement re-emphasized:

Educators, students and graduates should be encouraged to use these extraordinary circumstances to enhance unique and creative learning opportunities congruent with the client’s unique context just as all occupational therapists are currently doing (p. 2).

****This nomenclature is being used by CUFÉ for the purpose of this document to categorize placements since 'conventional' is defined as what is based on or in accordance with what is generally done or believed.

The current occupational therapy practice environment is complex and graduates require a variety of skills to successfully navigate within such an environment (Fortune et al, 2013). “*Today’s graduates need skills to enable occupation at clinical (micro) and macro levels*” (Fortune and McKinstry, 2012 p. 274) as well as opportunities that demand they perform within authentic environments which require innovation and the ability to function within change and uncertainty. Fieldwork opportunities beyond conventional environments provide opportunities for development of these required skills (Fortune and McKinstry, 2012) while still drawing on and developing the core set of OT competencies.

LEAP and other non-conventional placements provide a significant number of these diverse fieldwork opportunities within the Canadian context. For example, leadership placements provide students exposure to “... *career paths in many areas beyond that of the front-line occupational therapy clinician [which] require graduate and post-graduate degree credentials including research, administration and management positions in the health and social sectors* (WFOT, 2016, p. 7). Furthermore, role-emerging/role-enhancing placements enable students to be involved in “*existing and emerging services, such as services being developed for and with people who are under-employed, disempowered, dispossessed or socially challenging; organizations and industries that may benefit from occupational therapy expertise*” (WFOT, 2016, p. 49).

Placements focused on projects are seen as opportunities for *“learners to draw together a range of attributes that support the ability to manage complex issues that have occupational relevance at a macro level. In addition, such experiences help learners to develop agency and political acumen both increasingly important capabilities for the contemporary workplace”* (Fortune & McKinstry, 2012, p. 265).

Justice, Equity, Diversity & Inclusion (JEDI) Within Fieldwork:

As noted previously, a broad range of fieldwork experiences, which include addressing the occupational needs of populations, communities and societies, is necessary to enable future occupational therapists *“to engage in community capacity building and societal change beyond the individual”* (WFOT 2016, p. 5).

A ‘societal purpose’ is called for by the WFOT (2016, p. 11) and fieldwork placements serving communities and populations are encouraged in order to *“... advance social participation, health, wellness and social inclusion globally with knowledge and practices that address the social determinants of health and occupational justice, beyond bodily dysfunction”* (p.6). Furthermore, as noted in the placement parameters above, a diversity of personal and sociocultural characteristics, such as gender, ethnicity, age, and language, that is reflective of the Canadian population and our current political-socio-cultural context is a necessary component of the fieldwork experience (p.46).

Often non-conventional practice settings serve individuals and communities not typically served in conventional ‘mainstream’ health and social services. During fieldwork placements, these settings enable students to critically examine their experiences through a JEDI ‘lens’ and address broad societal needs including disparities in health care access, provision of equitable service delivery, and occupational injustice (Wilson et al, 2020).

Conclusion:

With the encouragement of ACOTUP, a subcommittee of CUFE was struck to review the existing evidence-based definition of fieldwork for Canadian occupational therapy education and clarify if fieldwork practices and contexts used since the outset of the pandemic were aligned and adhering to the existing definition and standards. The subcommittee reviewed international and national documents, including accreditation standards, and publications related to ‘non-conventional’ fieldwork.

The Minimum Standards for the Education of Occupational Therapists (WFOT, 2016) and the COVID-19 and WFOT Minimum Education Standards Statement (2020) were seen as foundational to our national accreditation standards and subsequently to the subcommittee’s understanding of how fieldwork is defined. Furthermore, the WFOT definition and accompanying standards were considered to provide sufficient structure as well as scope to both support and be reflective of fieldwork practice in our current national context.

Acknowledgement & Authorship:

The national collaboration reflected in this document was possible due to the cooperation and contribution of the entire CUFE membership.

CUFE Sub-Committee on Clarifying the Definition of Fieldwork (initiated March 2021):

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Appendix B: Examples of Fieldwork Site Profile Form

Example 1: Fieldwork Site Profile (FS-PRO): Learning Opportunities and Resources

Please fill in and return to your affiliated university occupational therapy program.

Site and Contact Information

Name of site: _____

Address: _____

Web site: _____

Name and title of contact: _____

E-mail address*: _____

☐ Supporting material about the site and occupational therapy services attached
(e.g. pamphlet, brochure, fact sheet)

**of contact person*

Declaration of Site Representative

☐ I have read and am in agreement with Section 1 and 2 of the *Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT)*

☐ I understand that occupational therapists at this site acting as preceptors for occupational therapy students will have at least one year of experience as a practicing occupational therapist, as per the Canadian Association of Occupational Therapy recommendations.

Characteristics of Occupational Therapy Services:

1. Occupational therapy services are organized on: ☐ an O.T. department basis ☐ a program basis
☐ No O.T. on site ☐ other: _____

2. System(s) / services in which you practice: ☐ Public sector ☐ Private practice

☐ Rehabilitation centre	☐ Outpatient clinic	☐ Hospital
☐ Long term care centre	☐ Home care	☐ Day hospital
☐ Insurance industry	☐ Community setting	☐ School

☐ Other: _____

3. Occupational therapy roles: ☐ Direct care ☐ Indirect care ☐ Consultation ☐ Research
☐ Administration ☐ Other: _____

4. Client life span: ☐ Children ☐ Adolescents ☐ Adults ☐ Older adults

Characteristics of Occupational Therapy Services (continued):

5. Client conditions: ☐ Mental health ☐ Physical health ☐ Combined ☐ Other

Please list common client issues:

6. Occupational therapy focus:

7. Hours of operations: _____

8. Total number of occupational therapists working at/for your site:

☐ Full Time: _____ ☐ Part Time: _____

9. Support personnel (e.g. OTAide, rehab assistant)? ☐ yes ☐ no If yes, how many: _____

Learning Opportunities and Resources for Students:

1. Access to a library (either on or off-site) : ☐ yes ☐ no

2. Other learning opportunities and resources for students (*please list*):

(*e.g. interprofessional contacts, field trips, resource binders*):

3. Please state your general learning and performance expectations of students (other than the ones from the University) to assist them in preparing for fieldwork education at your site.

Administrative Resources:

1. Orientation session offered upon students arrival:
☐ yes ☐ no, it will be available on (*specify date*): _____
2. Space and resources available to students (phone, desk, workstation, etc.):
3. Policies and procedures information available:
☐ yes, location: _____

☐ no, it will be available on (*specify date*): _____
4. Health and safety policy in place:
☐ yes ☐ no, it will be available on (*specify date*): _____
5. Emergency procedures information available:
☐ yes, location: _____

☐ no, it will be available on (*specify date*): _____
6. Contingency plan available (for absent fieldwork educator during placement):
☐ no, it will be available on (*specify date*): _____

☐ yes. Please outline its major characteristics:

Administrative Resources (continued):

7. Continuing education plan in place for occupational therapists on site:

☐ no, it will be available on (*specify date*): _____

☐ yes. Please outline its major characteristics:

Please outline your site's continuing education policy or describe how occupational therapists remain current in issues that impact their professional practice. Also, describe use of evidence based practice:

Amenities Available to Students:

1. Cafeteria: ☐ yes ☐ no
2. Kitchen facilities: ☐ microwave oven ☐ refrigerator ☐ other: _____
3. Locker: ☐ yes ☐ no
4. Bicycle rack: ☐ yes ☐ no
5. Parking: ☐ yes, cost: _____ ☐ no
6. Public transportation available: ☐ yes ☐ no
7. Other (*please list*): (e.g. accommodations for students)

Site Requirements for Students:

1. Immunization: ☐ yes ☐ no If yes, specify in box below.
 2. Criminal / police record check: ☐ yes ☐ no If yes, specify in box below.
 3. Dress code: ☐ yes ☐ no If yes, specify in box below.
 4. A car is required during placement hours: ☐ yes ☐ no
- ☐ If yes, describe the site “gas reimbursement” policy for OT students, in the box below.

Please specify additional information and/or requirements (e.g. mask fit testing):

Message to Students:

Please add anything else you would like students to know or prepare for prior to starting a placement at your site.

☐ Pre-placement information package sent to student (e.g. reading list or material, schedule): ☐ yes ☐ no

Signatures:

Profile completed by: _____ date: _____
(Name and title)

My organization wishes to offer placements to occupational therapy students from:

☐ my affiliated University ☐ Canadian universities ☐ International O.T. programs

For fieldwork education purposes, I hereby authorize my affiliated university occupational therapy program to forward the information included in the FS-PRO to students and fieldwork coordinators from other occupational therapy programs.

Signature: _____ date: _____

If you have any questions or comments, please contact your university representative:

Name: _____

E-mail address*: _____

Example 2: Fieldwork Site Profile (FS-PRO):

Adapted with permission from NACEP

SECTION ONE – FACILITY

1. Facility Name: _____
2. Facility Address: _____
3. Contact Name and title:

4. Contact email: _____
5. Is the facility accredited? ☐ Yes ☐ No
6. Does your facility carry liability insurance? ☐ Yes ☐ No
7. Does your facility endorse the *Canadian Guidelines for Fieldwork Education in Occupational Therapy (CGFEOT)*? ☐ Yes ☐ No
8. What charting methods are used by your facility? (e.g. Paper, electronic...)
9. Is student parking available on-site? ☐ Yes ☐ No

If yes, please specify: _____

10. Does your facility have a specific dress code? ☐ Yes ☐ No

If yes, please specify: _____

SECTION TWO – STAFFING

Describe your staffing complement for Occupational Therapist(s)?

	Total FTE	# full-time	# part-time
OTs			

SECTION THREE – FACILITY HEALTH AND ADMINISTRATION REQUIREMENTS

1. Is a **criminal reference check** required? ☐ Yes ☐ No

How recent must the record check be?

2. Is **mask fit testing** required? ☐ Yes ☐ No

3. Does your facility require any immunization beyond the requirements prescribed by the Quebec Department of Public Health (Protocole d'Immunisation du Québec (PIQ))? _____

Yes ___ No

If yes, please specify: _____

4. Is travel required as part of the student's clinical placement? ___ Yes ___ No

If yes, does the student require a vehicle? ___ Yes ___ No

SECTION FOUR – STUDENT EXPERIENCE

Please select all opportunities below that may be available to a student while on clinical placement at your facility:

1. Practice Settings (please check all that apply):

- | | |
|------------------------------------|----------------------------|
| • Acute care hospital | • Community |
| • Rehabilitation hospital/facility | • Administration/ Research |
| • School/School Board | • Non conventional/Role- |
| • Private Practice | emerging/Role-enhancing |
| • Home care | • Other (please specify): |
| • Long term care facility | _____ |

2. Areas of practice (please check all that apply):

- | | |
|---------------------------|-------------------------------|
| • Mental Health | • Oncology |
| • Amputees | • Orthopedics |
| • Assistive Technology | • Palliative Care |
| • Burns | • Spinal Cord Injury |
| • Cardiac/Cardiac surgery | • Surgery |
| • Neurology/CVA/TBI | • Developmental Delay |
| • Driving | • Low vision |
| • ER | • Musculoskeletal |
| • Ergonomics | • Chronic Pain |
| • Hand therapy | • Wellness / Health Promotion |
| • ICU | • Geriatrics |
| • Medicine | • Other (please specify): |
| • NICU | _____ |

3. Patient age groups (please check all that apply):

- Preschool age (<4 years)
- School age (4-17 years)
- Mixed children (0-17 years)
- Adults (18 to 64 years)
- Older adults (65 years and up)
- Mixed adults (18+)
- All ages

4. Categories of common conditions (please check all that apply):

- Autism/Neurodiversity
- Musculoskeletal
- Neurological
- Cancer
- Cardio-vascular and respiratory
- Dementia & other aspects of cognitive decline
- Developmental disability
- Surgery
- Other (please specify): _____

5. Special programs / activities / learning opportunities (please check all that apply):

- | | |
|-------------------------------------|---|
| • Advocacy | • Palliative/End of Life care |
| • Caregiver/family education | • Pelvic floor rehab |
| • Case-management | • Policy development |
| • Chronic disease management | • Polytrauma |
| • Classroom consultation | • Poverty/homelessness |
| • Community care/Crisis/Development | • Psychotherapy |
| • Dysphagia | • Research |
| • Equity and Justice | • Non-conventional/role-emerging/role-enhancing |
| • Global health | • Sensory integration and processing |
| • Group programs | • Sexuality and gender |
| • Home assessments and modification | • Service/business administration |
| • Independent living and housing | • Substance use/Addictions |
| • Indigenous health | • Telehealth |
| • Insurance assessment | • Universal and inclusive design |
| • ICU/ER | • Veterans affairs or Armed forces |
| • Leadership and change agency | • Other (please specify): _____ |
| • Medical-legal services | |
| • Orthotic/Prosthetic fabrication | |

6. Inter-professional collaborations, interactions and/or observation (please check all that apply):

- | | |
|--|---------------------------------|
| • Administrator | • Respiratory Therapist |
| • Community support worker | • Social worker |
| • Dietician/Nutritionist | • Speech Language Pathologist |
| • Kinesiologist | • Orderly (PAB) |
| • Nurse / Nurse Practitioner | • Teacher/principal |
| • Physiotherapist | • Special educator |
| • Osteopath | • Neuropsychologist |
| • Physician/Specialist | • Psychologist |
| • Physiotherapy Technologist/Assistant | • Patient partner |
| • Prosthetist | • Other (please specify): _____ |
| • Recreational Therapist | |

7. During a typical student clinical placement, students are expected to complete approximately 35 hours per week. What is a typical weekly schedule that a student can expect at your facility?

8. A fieldwork site is expected to offer a structured clinical learning experience for students. The clinical educator is expected to set learning objectives and discuss expectations with the student, and to provide them with regular, constructive, and actionable feedback. Please indicate what types of tools your site uses to accomplish these requirements:

- A structured orientation session
- Use of a learning contract and clinical learning objectives
- Structured practical sessions with the student
- Regular reserved time for feedback
- Education sessions
- Other (please specify): _____

9. Please provide any additional information you feel may be useful:

10. Please provide any useful web links that students should consult in preparation for a clinical placement at your facility:

This form was completed by:

Name: _____

Position: _____

Telephone: _____

Email address: _____

Date: _____

Appendix C: Example of a student site evaluation form

STUDENT REPORT ON FIELDWORK PLACEMENT

Facility:

Program/Service:

Fieldwork preceptor(s):

Date of Placement:

Student:

Students are to complete this form at the midterm and final evaluation periods of the placement and then review and discuss it with the preceptor(s). Student and preceptor signatures are required after discussing the form at both midterm and final. The form must be returned to the University of Toronto fieldwork administrative assistant after the completion of the placement.

INSTRUCTIONS:

- Students are encouraged to provide comments as they are extremely valuable and assist in clarifying ratings. Comments are especially helpful if there is student dissatisfaction.
- Spaces for ratings are indicated at the end of each line. Please mark the appropriate rating box according to the following scale:

Fully Agree: Meaning that the statement completely reflects your experience and this area does not require improvement

Agree in Part: Meaning that the statement only partially reflects your experience and this area requires some improvement

Disagree: Meaning that the statement does not reflect your experience at all and requires much improvement

N/A: Meaning that the statement is not applicable for the setting, placement level, or situation

ORIENTATION	Midterm			
	Fully Agree	Agree in Part	Disagree	N/A
I was adequately oriented to the facility/organization	☐	☐	☐	☐
I was adequately oriented to the program	☐	☐	☐	☐
I was adequately oriented to staff	☐	☐	☐	☐
I was adequately oriented to the materials, supplies and equipment	☐	☐	☐	☐
I was adequately oriented to emergency and safety procedures	☐	☐	☐	☐
I was adequately oriented to workload measurement	☐	☐	☐	☐
I was adequately oriented to charting/documentation procedures	☐	☐	☐	☐
Comments:				

ORGANIZATIONAL CLIMATE/LEARNING ENVIRONMENT	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A
Interaction with other health professionals was available during the placement	☐	☐	☐	☐		☐	☐	☐	☐

National Association for Clinical Education in Physiotherapy

Participation as part of the program/department/health care team was encouraged	☐	☐	☐	☐		☐	☐	☐	☐
Library and other learning resources (including staff expertise) was available	☐	☐	☐	☐		☐	☐	☐	☐
The site fieldwork coordinator was helpful in dealing with clinical fieldwork issues	☐	☐	☐	☐		☐	☐	☐	☐
Overall this placement provided the learning experience required to develop basic competency in this area of practice appropriate to my clinical level	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									
Comments at final:									

RAPPORT WITH PRECEPTOR	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A
My preceptor communicated with me in an effective manner	☐	☐	☐	☐		☐	☐	☐	☐

My preceptor was sensitive to my learning style and adjusted his/her teaching style appropriately	☐	☐	☐	☐		☐	☐	☐	☐
Expectations, roles and responsibilities of a student at my level were discussed with my preceptor as required.	☐	☐	☐	☐		☐	☐	☐	☐
My personal learning objectives were taken into account throughout the placement	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor was available and easily accessible	☐	☐	☐	☐		☐	☐	☐	☐
I felt comfortable asking my preceptor questions	☐	☐	☐	☐		☐	☐	☐	☐
Overall, I feel that I developed good rapport with my preceptor	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									
Comments at final:									

FACILITATION OF DEVELOPMENT OF CLINICAL REASONING SKILLS	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A
My preceptor served as a good role model in the development of my clinical reasoning skills	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor was a good resource for development of my clinical reasoning skills	☐	☐	☐	☐		☐	☐	☐	☐

Appropriate time was scheduled for discussions regarding clinical reasoning and the management of clients	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor provided appropriate opportunities for the progression of my independence and responsibilities	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor encouraged me to critically think through problems	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor encouraged me to develop self-directed learning skills	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									
Comments at final:									

LEARNING OPPORTUNITIES	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A
My preceptor facilitated the meeting of my learning objectives	☐	☐	☐	☐		☐	☐	☐	☐
The variety of conditions provided a valuable learning experience	☐	☐	☐	☐		☐	☐	☐	☐
My caseload was appropriate (in numbers and complexity) for my level	☐	☐	☐	☐		☐	☐	☐	☐

National Association for Clinical Education in Physiotherapy

There was adequate opportunity to develop and practice interview skills	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice the administration of assessments and outcome measurements	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice the identification of occupational performance issues	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice the implementation of treatment plans	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice evaluation of treatment plan progression	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice documentation skills	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice skills in discharge planning	☐	☐	☐	☐		☐	☐	☐	☐
There was adequate opportunity to develop and practice appropriate communication with other members of the health care team	☐	☐	☐	☐		☐	☐	☐	☐
Opportunities to attend in-services and or relevant meetings were provided	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									

Comments at final:

FEEDBACK	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A
I was provided with timely and appropriate positive feedback and reinforcement	☐	☐	☐	☐		☐	☐	☐	☐
I was provided with timely and appropriate constructive feedback and suggestions for improvement	☐	☐	☐	☐		☐	☐	☐	☐
Appropriate time was scheduled for discussion regarding my progress	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor created an open environment and encouraged me to provide feedback on his/her performance	☐	☐	☐	☐		☐	☐	☐	☐
My preceptor was responsive to my feedback on his/her performance	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									
Comments at final:									

EVALUATION	Midterm					Final			
	Fully Agree	Agree in Part	Disagree	N/A		Fully Agree	Agree in Part	Disagree	N/A

I feel I was adequately supervised which allowed my preceptor to record a true reflection of my performance on the CBFE-OT evaluation	☐	☐	☐	☐		☐	☐	☐	☐
Evaluations were completed by the pre-determined period	☐	☐	☐	☐		☐	☐	☐	☐
Discussions with my preceptor regarding the evaluations included collaborative plans to improve performance and/or learning opportunities	☐	☐	☐	☐		☐	☐	☐	☐
Comments at midterm:									
Comments at final:									

The most positive aspects of this placement were:
Some suggestions for enhancing the learning experience are:

FINAL ONLY

Evaluation	Excellent	Very Good	Good	Fair	Poor
Upon completion of this placement, how would you rate this clinical experience?	☐	☐	☐	☐	☐
Overall Comments:					

Midterm Review	Final Signatures
This form was reviewed by and discussed with the following individuals at mid-term:	Student Signature: _____
	Preceptor(s) Signature: _____
	Preceptor(s) Signature: _____
Date:	Date:

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**EXPERIENTIAL LEARNING PLACEMENT AGREEMENT
BETWEEN
QUEEN'S UNIVERSITY AT KINGSTON
(hereinafter called the "UNIVERSITY")**

**AND
XXX
(hereinafter called the "HOST ORGANIZATION")**

1. Purpose

- a) To set out the terms under which the Host Organization will provide experiential learning placements and related instruction to students of the University, recognizing that ensuring an appropriate environment conducive to the learning and professional development of the students participating in such a placement is a mutual obligation of both the Host Organization and the University.

2. Term and Termination

- a) This Agreement shall be in effect commencing _____ and shall continue for a period of _ years until _____ unless either Party gives written notice of termination. Two months' written notice of termination may be given by either Party.
- b) Except as specifically provided herein, where written notice of termination has been given, such termination shall not negatively impact the placement of any student who is in the midst of a placement when such notice is given. No new students will be placed with the Host Organization after notice of termination has been given.
- c) None of the Parties to this Agreement shall be liable to the other or be deemed to be in breach of this Agreement for any failure or delay in rendering performance arising out of causes beyond its reasonable control and without its fault or negligence. Such causes may include, but are not limited to, governmental regulation or control, acts of nature or of a public enemy, acts of terrorism, mass-casualty event, fire, flood, local, regional or global outbreak of disease or other public health emergency, social distancing or quarantine restrictions, strike, lockout or labour or civil unrest, unusually severe weather, failure of public utility or common carrier, or computer attacks or other malicious act, including attack on or through the internet, or any internet service, telecommunications provider or hosting facility. Where either Party to this Agreement concludes that it cannot perform its obligations under this Agreement due to such a cause, that Party shall notify the other Party promptly. Both Parties shall then negotiate in good faith to determine whether it is reasonably feasible to extend the dates or times of performance of this Agreement to permit the completion of any student placement then in progress. If no agreement is reached by the Parties within 30 days of notice being given, the placements of any affected students shall not be extended.

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School of Rehabilitation Therapy

Approved by the Academic Council: August 19, 2014

Revised: February 2020

Approved by Academic Council: March 3, 2020

Effective date: March 3, 2020

Rationale and background

An International Placement in the MScPT or MScOT Program is an optional way to achieve course credit for one of the required placements in the respective programs. It is recognized that International Placements provide students with a unique opportunity to develop clinical skills, while also combining learning in the areas of global education and cultural diversity. That being said, the safety of all students on an international clinical placement is of paramount importance and the University has a responsibility to help manage the risks associated with International Placements.

This document sets out the necessary steps that must be followed by Queen's University and the School of Rehabilitation Therapy (SRT) to demonstrate due diligence prior to making a decision in regards to a Queen's SRT student participating in an International Placement opportunity.

Scope of policy

For the purposes of this policy, "Placement" refers to Community Development Placements in the OT Program, Clinical Fieldwork Placements in the OT Program, and Clinical Placements in the PT Program.

These guidelines were prepared to assist in the understanding and administration of International Placements, and apply to Physical Therapy (PT) and Occupational Therapy (OT) students from the SRT, Queen's University. The opportunity to participate in an International Placement is considered to be a privilege which may be negotiated for a second year student with good academic standing, who has a record of excellent performance in all previous clinical placements.

Policy statements

To be considered for a placement outside of Canada, a student must be approved by the Physical Therapy/Occupational Therapy Program. Conditions for eligibility:

1. A student must be in their final year of the program in order to participate in an International Placement.
2. A student may participate in only one International Placement (with the exception of OT 862 and/or OT 877)
3. A letter of intent and two references (one from a clinical instructor/preceptor and one from a faculty member) must be submitted by the student.
4. The student must maintain a minimum overall grade point average of 80%, without exception. This standing must be maintained until the commencement of the International Placement.
5. The student must have progressed through the program with no conditions, concerns, or course failures.

School of Rehabilitation Therapy

6. The student must complete the “Acknowledgement of Risk” form, a “Student Code of Conduct Form” and a “Higher-Risk” Off Campus Activity Safety Policy (OCASP) online submission. Completion of the pre-departure orientation, part of the on-line OCASP process, is mandatory..
7. There must be favourable consensus from both the respective academic and clinical faculty that the student demonstrates professional behaviour in both academic and clinical situations (e.g., independence, maturity).
8. A signed affiliation agreement with the international site must be in place, prior to confirmation of the placement.
9. For “Level 2” countries [“Exercise high degree of caution”, according to Global Affairs Canada] students may be required to travel in pairs.
10. For “Level 2” countries (Global Affairs Canada), the International Placement Committee in the SRT must approve the country and/or region of interest. Applications must be submitted to the ACCE/FC before the deadline (identified each year).

Procedures

1. Normal Steps in Securing an International Placement
 - a. See Appendix A for Clinical/Fieldwork Placements
 - b. See Appendix B for Community Development Placements

Note: A student must be prepared to accept a placement in the Queen’s catchment area in the event of cancellation of the International Placement.

The School of Rehabilitation Therapy cannot guarantee the cooperation of foreign institutions should students require accommodations while on an International Placement. Although we can assist in communicating needs to international institutions, not all countries possess human rights legislation that would compel an institution to provide appropriate accommodations, including accommodations for human rights related grounds such as disability or faith requirements, etc. Please be aware that the SRT also offers several local options to gaining the necessary credits for completion of the MScPT or MScOT degree.

2. Location of the Placements
 - a. The SRT has established relationships with a variety of International Placement partners. Students will be informed of these opportunities through the Academic Clinical Coordinator of Education (ACCE) or Fieldwork Coordinator (FC). Students may seek placements with facilities other than those with pre-existing relationships with the SRT.
 - b. Under no circumstances will a student be permitted to participate in a placement in a country deemed a “Level 3 (Avoid non-essential travel) or Level 4 (Avoid all travel)” by Global Affairs Canada.

3. Timing and Duration

Students should refer to their program specific guidelines for information about placement timing and duration.

Appendix A: INTERNATIONAL CLINICAL PLACEMENT/FIELDWORK PROCESS SUMMARY

Student name: _____

Student identifies interest in an International Placement by completing the letter of intent and collecting two reference forms in support of the applicant (one faculty and one clinical supervisor-- form found on the learning management system [LMS]). Submit to the ACCE/FC once complete. Must include country/region of interest.

6-9 months
prior to start
of placement

Initials: ____
Date: _____



ACCE/FC will review the student file (academic record, placement history, etc.) to confirm eligibility and obtain program faculty approval. ACCE/FC will inform student once approved. Student must maintain academic standing.

6 months
prior to start
of placement

Initials: ____
Date: _____



ACCE/FC researches information regarding country and region on the Department of Foreign Affairs Trade and Development (DFATD) website. If Level 1, move to next step. If level 3 or 4, stop search process and student informed that country will not be approved. (*see description of levels on 2nd page) If Level 2, student will be asked to fill out the "Risk Management Plan" (form found on the LMS— which mirrors the OCASP form). Students are asked to go to the DFATD website (<http://travel.gc.ca/travelling/advisories>), examine the risks identified, and outline how each individual area of risk will be managed for the "Risk Management Plan". Student will submit the Risk Management Plan to the ACCE/FC and Director of the School for further review. The International Placement Committee will review all Level 2 Risk Management Plans and make a decision about the proposed country. The ACCE/FC will inform the student if they may continue to investigate a placement in the proposed country.

6 months
prior to start
of placement

Initials: ____
Date: _____



Student begins to explore options for facilities that may accept a student. Student may look on the SRT website for locations where Queen's students have been on placement in the past. Also, the student may make an appointment with the ACCE/FC to discuss sites with existing affiliation with Queen's.

6 months
prior to start
of placement

Initials: ____
Date: _____



Student finds a facility that offers to supervise them. Student will need to send the ACCE/FC:

1. Full contact information of CI/facility
2. Description of PT/OT services
3. Written confirmation of placement dates, type of placement and setting and willingness to accept and supervise the student.

4-5 months
prior to start
of placement

Initials: ____
Date: _____



4-5 months
prior to start
of placement

Initials: ____
Date: ____

ACCE/FC will contact the CCCE/CI/Preceptor at the host facility, confirm the details of the placement (dates, type of placement, full name of CI/Preceptor) and request CCCE fill out a "Site Profile". ACCE/FC will review the Site Profile and ensure that responses meet the established criteria for an appropriate clinical placement. ACCE/FC will inform the student if additional information is required or if the site/hours/CI/Preceptor credentials, etc. do not meet the standards for a placement.

3 months
prior to start
of placement

Initials: ____
Date: ____

ACCE/FC will obtain a signed affiliation agreement and inform the student once the affiliation agreement is in place

3 months
prior to start
of placement

Initials: ____
Date: ____

Student signs "Acknowledgement of Risk" form (found on the LMS)

As per
immunization
and visa
schedules

Initials: ____
Date: ____

Student investigates and secures required visas, immunizations, travel/medical insurance, airfare, accommodations at their own expense. (Note: may need to start visa process earlier depending on country)

6-8 weeks
prior to start
of placement

Initials: ____
Date: ____

Student will complete the OCASP form <http://webapp.queensu.ca/safety/ocasp> (Higher Risk Activity), including the information used in the risk management plan AND review of the DFATD website <http://travel.gc.ca/travelling/advisories> for changes. Information will be sent to the ACCE/FC and Director of the SRT for review once completed by the student online. The student will receive a response of "approved" or "rejected"

Note: the placement may still be cancelled if the risks in the region have changed

Student leaves on placement!

Department of Foreign Affairs Trade and Development (DFATD) Levels

* Level 1 = Exercise normal security precautions
Level 3 = Avoid non-essential travel

Level 2 = Exercise high degree of caution
Level 4 = Avoid all travel

Appendix B: INTERNATIONAL COMMUNITY DEVELOPMENT (OT862) PLACEMENT PROCESS SUMMARY

Student name: _____

Student identifies interest in an international community development (CD) placement by completing the letter of intent and collecting two references (one faculty and one clinician—forms found on the LMS). Submit to the course coordinator once complete. Must include CD site of interest. Course coordinator will review the student file (academic record, placement history, etc.) to confirm eligibility and obtain program faculty approval.

6-7 months
prior to start
of placement

Initials: _____
Date: _____



If eligible to proceed, student will be asked to complete the “Risk Management Plan” (section 4) of OCASP (<http://webapp.queensu.ca/safety/ocasp>). Student must go to the Department of Foreign Affairs Trade and Development (DFATD) website (<http://travel.gc.ca/travelling/advisories>), examine the risks identified, and outline how each individual area of risk will be managed. Student will submit the incomplete OCASP form to the course coordinator and SRT Director for further review. The International Placement Committee will review the plans and make a decision about the proposed country.

5-6 months
prior to start
of placement

Initials: _____
Date: _____



Student signs “Acknowledgement of Risk” form (found on the LMS).

5 months
prior to start
of placement

Initials: _____
Date: _____



Student investigates and secures required visas, immunizations, travel/medical insurance, airfare, accommodations at their expense. (Note: may need to start visa process earlier depending on country)

As per
immunization
and visa
schedules

Initials: _____
Date: _____



Student completes the online OCASP form, including a review of the DFATD website for changes (Higher Risk Activity). Information will automatically be sent to the Course Coordinator and SRT Director for review once completed by the student online. Note: the placement may be cancelled if the risks in the region have changed.

2 months
prior to start
of placement

Initials: _____
Date: _____



Student leaves on placement!

Department of Foreign Affairs Trade and Development (DFATD) Levels (<http://travel.gc.ca/travelling/advisories>)

Level 1 = Exercise normal security precautions

Level 2 = Exercise high degree of caution

Level 3 = Avoid non-essential travel

Level 4 = Avoid all travel



ACKNOWLEDGEMENT AND RELEASE FOR INTERNATIONAL STUDENT CLINICAL PLACEMENTS

WARNING: BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. PLEASE READ CAREFULLY!

Initials:

NAME (Please Print): _____

ADDRESS (Street Name & #): _____ CITY: _____ PROV: _____

TELEPHONE NUMBER(S): _____ EMAIL: _____

INTERNATIONAL PLACEMENT ORGANIZATION: _____

INTERNATIONAL PLACEMENT DATE(S): _____

INTERNATIONAL PLACEMENT LOCATION(S): _____

I _____ acknowledge that there are many available local or Canadian placements, but I have nevertheless chosen an international placement ("International Placement"). I have participated in the _____ training and am aware that there may be certain additional risks associated with International Placements.

DISCLAIMER

I acknowledge and accept that Queen's University at Kingston, its trustees, officers, directors, agents, contractors, employees, volunteers, members and representatives (all hereunder collectively referred to as "the Released Parties") are not responsible for any injury, death, loss or damage of any kind sustained by me while participating in the International Placement above described and in any related activities, including injury, loss or damage which might be caused by the negligence of the Released Parties. I am aware that participating in the International Placement has inherent risks.

Initials: _____

I hereby ACKNOWLEDGE, WARRANT, REPRESENT AND AGREE THAT:

1. I am 19 years of age or older, in good health and appropriate physical condition for travel, and I am not suffering from any physical medical condition that might be aggravated by my participation in the International Placement or that might pose a danger to myself or others while I am engaged in the International Placement.
2. I acknowledge that there are risks inherent in international travel which may result in the modification or cancellation of the International Placement, including different environmental and weather conditions than those in Canada, illness, political disturbances, transportation problems, a lack of medical personnel or medical facilities to treat injuries or illnesses, standards of criminal justice that are different than Canadian standards, problems with customs, immigration or visa requirements or other circumstances either within or beyond the control of Queen's. I acknowledge that Queen's may modify or cancel this clinical placement before or during the clinical placement. I acknowledge that it is my responsibility to learn as much as possible about the risks associated with the International Placement, to weigh those risks against the advantages and decide whether or not to participate. I acknowledge that if this International Placement is modified or cancelled, there is no obligation for Queen's to find me another placement and I release Queen's, its faculty and staff from any claims arising out of the modification or cancellation of the International Placement.
3. I understand that I will be covered by the government of Ontario's private insurance plan with Chubb Insurance in the event of illness or injury I may suffer in the course of the International Placement, unless the International Placement is in the country of my primary residence. *If the International Placement is in the*

country of my primary residence, I understand and acknowledge that it is my responsibility to arrange for workplace insurance coverage on my own that will cover any expenses I may incur as a result of accident or illness I may suffer in the course of the International Placement.

4. I have been advised to arrange for extended medical insurance coverage on my own account that will cover any medical or hospital expenses that I may incur during the period of the International Placement. I have also been advised that I am responsible for obtaining any visas or permits that may be necessary with regard to my travel to foreign countries. Further, I am responsible for obtaining any vaccinations or inoculations that are recommended or required by the government of a foreign country in which I will be traveling or by the Canadian Government for persons entering Canada from a foreign country.
5. I acknowledge that the Released Parties have no liability for any expenses, injury, loss, accident or property damage which may occur because of or in any way related to my participation in or the modification or cancellation of the International Placement. I understand that this includes expenses, injury, loss, accident or property damage that occurs from the time I commence my travel to the International Placement until I return to my home from the International Placement.
6. I acknowledge that the International Placement facility will be providing feedback to Queen's as to my performance at the International Placement.
7. I acknowledge that the International Placement facility may require me to withdraw if I fail to meet acceptable health or performance standards.
8. This Acknowledgement and Release is governed by and construed in accordance with the laws of Ontario.

I HAVE READ AND UNDERSTOOD THIS ACKNOWLEDGEMENT AND RELEASE AND I AM AWARE THAT BY VOLUNTARILY SIGNING I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

Signed this _____ day of _____, 20____

Participant
(Print Name): _____

Participant
(Signature): _____

Witness
(Print Name): _____

Witness
(Signature): _____

**This form must be complete in full, signed, dated and witnessed
before participation in the International Placement can begin.**

Privacy: Personal information in connection with this form is collected under the authority of **The Queen's University Act, 1965** and will be used for the purpose of administering your participation in the International Placement and related purposes. If you have any **questions about the collection, use and disclosure** of your personal information by Queen's University, please contact: **Queen's University, Records Management and Privacy Office, Suite F300 Mackintosh-Corry Hall, 68 University Avenue, Kingston, Ontario, K7L 3N6, 613-533-6095**



OCCUPATIONAL THERAPY PROGRAM

STUDENT CODE OF CONDUCT FOR STUDENTS PLANNING AN INTERNATIONAL PLACEMENT

A student in the Occupational Therapy Program at Queen's University who wishes to undertake a fieldwork placement internationally must sign and abide by the following Code of Conduct.

I, _____ as a Queen's University student, hereby agree to:
(printed name)

Occupational Therapy related:

- provide appropriate care as it pertains to my level of knowledge and training.
- provide care with appropriate supervision for the level of my knowledge and training.
- provide care consistent with the scope of occupational therapy practice for an entry-to-practice occupational therapist with acknowledgement that I am not registered and providing services under the supervision of the OT preceptor.
- be culturally sensitive when providing services and working within a center or organization.
- arrive at the designated time.
- maintain confidentiality of clients/patients.
- not accept any monetary compensation for work.

Professionally:

- read and abide by the 'Off Campus Activity Safety Policy (OCASP)¹.
- complete the OCASP Risk Management for International Placements (OCASP Environmental Health and Safety).
- complete the pre-departure training of the Faculty of Health Sciences.
- obtain all necessary vaccinations and prophylactic medication before departure.
- take reasonable and appropriate steps to maintain personal safety
- conduct myself ethically.
- respect the dignity and inherent values of each person I work with.
- follow the laws of the host country, not engaging in illegal activities.
- contact the Fieldwork Coordinator and/or Associate Director (AD) of the Occupational Therapy Program to discuss and plan response/action in case of an emergent issue (any situation that could escalate to cause harm to yourself or another).

Emergency contact:

- recognize a deteriorating situation that may cause harm quickly, and contact the appropriate agency (as listed in the OCASP documents) for assistance and support. The contact agencies will include:
 - Local authorities;
 - International SOS (1-215-942-8478);
 - Local Canadian embassy or consulate;
 - Local partner school or institution;

¹ <https://www.safety.queensu.ca/campus-activities-ocasp>

- Queen's University 24 hr hotline (+1-613-533-6111); and/or
- Fieldwork Coordinator and/or the AD of the Physical Therapy Program.
- email the Queen's University Off-campus Emergency Support Program (ESP) Team regarding any non-critical situations.
- immediately inform the Fieldwork Coordinator and/or the AD of any problems you encounter, including inappropriate supervision for your level of training.
- work with the Fieldwork Coordinator to identify a mentor on location with whom you will discuss and seek advice on how to manage emergent situations.
- provide a brief weekly report to the Fieldwork Coordinator (email or other form of communication) regarding your status, including any situation or issue that could affect your well-being while on placement.

I acknowledge the risks involved in completing an **international placement**, including but not limited to, infectious disease, personal injury and death. I agree to take full responsibility for situations that I am placed in, and **will remove myself from any situation that I feel is unsafe** (i.e. unsafe transportation, poor infection control, management of the practice setting, sexual harassment/misconduct, threatening behavior, etc.).

I am aware that circumstances may arise where clinical professionals abroad might interpret my knowledge and skills as more advanced than they are. I agree to inform the appropriate person if at any time my knowledge and skills are overestimated, and if necessary, remove myself from the situation.

I am aware that in the event the Occupational Therapy Program, in collaboration with the Director of the School of Rehabilitation Therapy, and/or Dean of the Faculty of Health Sciences as appropriate, deems that a situation is evolving that may cause harm and cannot be effectively controlled, I will be withdrawn from the placement. I agree to abide by the decisions made by the Program, School, and/or Faculty.

Signature: _____

Date: _____

Witnessed (Fieldwork Coordinator, Occupational Therapy Program): _____

**Queen's School of Rehabilitation Therapy
International Placements**

Student Letter of Intent for an International Placement

Name: _____

Date: _____

1. Country of Interest (Name ONE only)

2. Facility and location (if known)

3. Dates to be considered:

2. Two referees; one OT faculty member and one preceptor from a previous fieldwork placement or fieldwork course (e.g. OT825 or OT851). Please have the referees complete the form available in this manual or made available via Rehab Central.

NAME

FACILITY

1 _____

2 _____

3. Goals and Objectives you wish to accomplish:

4. Unique learning you expect from an international placement:

Queen's School of Rehabilitation Therapy
International Placements

5. Academic Average:

Student signature: _____

Student email: _____

Queen's University
School of Rehabilitation Therapy
Reference for Student Applying for an International Fieldwork Placement

_____ (Student name) is applying for an

International clinical placement in _____ (country)

Students abroad are ambassadors for Queen's University, the School of Rehabilitation Therapy, the Occupational Therapy profession in Canada and all Canadians and have a responsibility to favorably and respectfully represent all these groups. Students must be able to adapt to different cultures, have a high level of academic ability (minimum overall grade point average of 80%) and demonstrated clinical competence in previous fieldwork.

Please rate this student on the following attributes:

	Exceptional	High	Moderate	Low	Unable to judge
Treats others with positive regard, dignity and respect					
Presents self in a professional manner					
Communication with others					
Academic knowledge					
Clinical ability					
Coping and adaptability					

I would recommend this student for an international fieldwork placement: YES / NO

Additional comments:

Referee Name _____

Signature _____

Date _____

Please fax or email the completed form to:

Clinical Placements – OT 847 or OT 877	Community Development Placements – OT 862
Fieldwork Coordinator Fax: 613-533-6776 otfieldwork@queensu.ca	Community Development Fieldwork Coordinator Fax: 613-533-6776 otfieldwork@queensu.ca

Study/Work/Travel Abroad Information

The following is a suggested list of activities that you should consider. You will need to add and prioritize accordingly. **PLEASE NOTE: The information below is provided as a general resource and should not be considered a conclusive. It represents general considerations for students preparing for fieldwork abroad. Students must review all of the information available via the Queen's University International Centre at <http://www.quic.queensu.ca/Default.asp> as well as the information made available from the Government of Canada at <http://travel.gc.ca/travelling/advisories>.**

Citizenship

If you don't already have a passport you will need to apply for one. Ensure you have a passport that is valid until at least one month after your return date. Processing for a passport can vary widely so make sure that you complete this early if you need to. Arrange for appropriate visas (the process may take several months). Determine if you are able to study and work or whether each requires a separate visa. Obtain the address of the Canadian Embassy or Consulate nearest your residence overseas. What do you know about Canada? Review current affairs and be prepared to be a cultural ambassador for your country, Canada.

Academic/Identity

Make photocopies of all necessary academic documents as well as other key documents e.g. identity cards, birth certificate, passport, plane tickets, prescriptions, visas etc. Prior to your departure, obtain the E-mail address, mailing address, telephone and fax numbers of the International Office and/or academic advisor at your host university.

Financial

Investigate anything related to financial aid/funding that is relevant to your own circumstances. Can you continue with your current aid programme when you are overseas e.g. OSAP? Clear any debts. (eg. library, parking, rent, etc.) Be sure to plan ahead for filing your income tax if you will be out of the Country at the time when personal returns are due. Arrange a Power of Attorney for someone you trust to make bank deposits and transfers, pay credit card bills and carry out other legal matters. Bring cash (\$US and local currency), traveller's cheques (\$US), and credit cards (optional). Check into your financial institutions policy for the use of Interac/debit in other countries; there may be extra fees and you should be aware of how they calculate currency exchange rate(s).

Health

Health and Accident Insurance are your responsibility. Consider what supplemental coverage you require or is required? Adequate insurance can make the difference between an enjoyable experience and a nightmare. Baggage and trip cancellation insurance is often a wise precaution.

Visit your family physician or Health, Counselling and Disability Services on campus to determine the vaccinations required for your destination and to develop your immunization schedule (begin at least three months ahead if bound for Asia, Africa or Latin America). Make sure to take sufficient prescription medications for the time that you are away. Carry spare glasses, lens prescriptions and sun screen. Make sure that you get a checkup done by your physician and your dentist if required before you leave. You will be subject to the regulations and laws of the place you will be visiting when it comes to alcohol and substances.

Find out the laws regarding the consumption of alcohol and/or substances; it is your responsibility to find out and abide by all regulations and/or laws in the Country you visit. Ensure that your emergency contact information is accessible, reliable and well documented.

Travel

Determine your mailing address overseas before you go. Perhaps it will be possible to arrange for temporary lodging with a host family.

You are responsible to book and pay for your own travel.

Consider whether your Driver's License expire while you are away and find out if you will need to obtain an International Driver's License (if you plan to drive while you are abroad)? Look after this BEFORE you leave.

Rail Passes

A rail pass can be a definite money saver for extensive travel (Eurail Pass, Japan Rail Pass, etc.). Some of these passes must be purchased outside of their respective countries/regions. International Student ID Card makes you eligible for a broad range of discounts overseas (available in the Alma Mater Society Office or Graduate Student Society Office).

International Youth Hostels Membership Card allows you to stay in hostels all over the world (no age limit except in Bavaria).

Telephone Use

If you are going to call Canada (or other Countries) while you are away, you may want to take along an international phone card. Check with the various long distance companies and purchase a plan/card that suits your need(s). If you will use your cell phone/smart phone while you are away check into your current plan with your provider; you may be surprised by roaming fees and/or upload/download fees. Some people choose to obtain a SIM card once they are at destination. This is your choice and responsibility.

Luggage

Take as little as possible (You will have to carry it around!) and make sure that your baggage conforms to all guidelines. You should review the information found on the Canadian Air Transport Security Authority website at <http://www.catsa.gc.ca/Home.aspx?id=1&lang=en>. Check out voltages in your host country before carting electrical devices with you. If you are staying with a host individual/family, consider taking some a small gift.

Guidebooks

Consider buying one(s) geared to your own travel style and itinerary.

Do some background reading about the countries you will visit, the people you will see, the cultures you will experience. Be sensitive to any differences in culture and be respectful of the cultural norms in your host country.

Language

Brush up on your foreign language skills and/or buy a phrase book.

Last updated: August 2014

**Queen's University Off-Campus Activity Safety Policy
Feedback/Evaluation Form**

Instructions

Participants in Off-Campus Activities may be asked to complete this Feedback/Evaluation Form upon return from an off-campus activity. Any participant has the option of completing this form even if it has not been requested. Completed forms should be submitted to the Off-Campus Activity Leader, Principal Investigator, Activity Coordinator, Department Head/Person in Authority, Director of Environmental Health and Safety, or any other appropriate University official. Information provided will be used to monitor off-campus activities, identify and evaluate potential risks, and improve training and support systems.

A. General Information

1. Category of person completing the form: ☐ Student ☐ Faculty Member ☐ Staff ☐ Other _____ (please specify, e.g., volunteer)	
2. Nature of Off-Campus Activity ☐ Research ☐ Academic (please specify) _____ ☐ Athletic ☐ Other (please specify) _____	
3. Location of off-campus activity ☐ domestic (in Canada) ☐ international (please specify country) _____	Setting (please provide details) ☐ urban _____ ☐ rural _____ ☐ remote _____

B. Preparation and Training (Please circle the appropriate response, and add comments/explanations where appropriate)

	poorly-----very well
1. How prepared were you for your off-campus activity?	1 2 3 4 5
In preparing for your off-campus activity, rate the usefulness of the following resources:	not useful-----very useful
2. Face-to-face pre-departure sessions	1 2 3 4 5
3. On-line pre-departure training	1 2 3 4 5
4. Other resources/publications provided	1 2 3 4 5
5. Other (please specify) _____	1 2 3 4 5
6. What improvements do you suggest and what other information do you think could have been provided?	
7. Is there anything else you wish you had or had not taken with you (e.g., equipment, clothing, documentation)?	

**Queen's University Off-Campus Activity Safety Policy
Feedback/Evaluation Form**

C. Living Accommodations			
1. Do you have any comments about the living accommodations that were provided?			
D. Health and Safety (please circle the appropriate response, and add comments/explanations where appropriate)			
1. In the case of an international activity, did you register at the Canadian Embassy/High Commission?	Yes	No	n/a
2. Did you acquire supplemental travel health insurance before you departed?	Yes	No	n/a
3. Did you have special needs that you identified prior to departure?	Yes	No	n/a
4. Were these special needs addressed during your off-campus experience?	Yes	No	n/a
5. Did your special needs become an issue during your off-campus experience Please explain:	Yes	No	n/a
6. Did you have any incidents affecting your health and/or safety that resulted in medical, legal or police support? Please explain:	Yes	No	n/a
7. Did you have any incidents affecting your health and/or safety that you did not take medical, legal or police action to address? Please explain:	Yes	No	
8. Did you become ill during your off-campus activity?	Yes	No	
9. Did you seek medical treatment?	Yes	No	
10. Did you have to abandon the activity prematurely due to illness or injury?	Yes	No	
11. Was illegal or disturbing drug-related activity evident in the area in which you were living/working?	Yes	No	
12. Did anyone intentionally damage any of your property?	Yes	No	
13. Did anyone steal anything from you? (e.g., from your room, car or luggage, even if it was something minor. Include the theft of books.)	Yes	No	
14. Did anyone take anything from you using force or the threat of force?	Yes	No	

**Queen's University Off-Campus Activity Safety Policy
Feedback/Evaluation Form**

15. Were you the victim of an assault? Please explain:	Yes	No
16. Did you experience or observe any obscene or annoying or harassing behaviour, not involving violence? Please explain:	Yes	No
17. Were you caught up in any riots, public demonstrations or acts of civil unrest? Please explain:	Yes	No
18. Did you experience any natural calamity (<i>e.g.</i> , flood, fire, earthquake)? Please explain:	Yes	No
19. Did you experience any form of danger not directed specifically at you? Please explain:	Yes	No
20. Do you have first-hand knowledge of any crime affecting another participant in your activity? Please explain:	Yes	No
21. Did you make use of the Queen's Emergency Support Protocol? Please explain:	Yes	No
Very unsafe-----very safe		
22. In general, how safe did you feel during your off-campus experience?	1	2 3 4 5
23. If your activity involved a host situation, how safe did you feel at your host institution?	1	2 3 4 5
If you felt unsafe or very unsafe, please explain in what way the host situation was unsafe:		
not at all resolved-----fully resolved		
24. If you experienced any health or safety incident, please indicate the degree of satisfaction that you feel regarding its resolution? Please explain:	1	2 3 4 5
25. Please provide any other comments that you feel would be useful when planning and preparing for similar activities in the future (attach additional sheets if necessary):		

When completed, this form may be submitted to the Off-Campus Activity Leader, Principal Investigator/Activity Coordinator, Department/Unit Head, Director of Environmental Health and Safety, or other University official.



**CLINICAL/FIELDWORK PLACEMENT
REQUIREMENTS FOR
SCHOOL OF REHABILITATION THERAPY**

2026 - 2027

Proof of Immunization/Serologic Status

Confidential

Requirements	Full Immunization Record	Mantoux Test (TB)	Flu Shot	First Aid- CPR	Vulnerable Sector Check
Year 1 September, 2026	✓	✓	✓	✓	✓
Year 2 September, 2027		✓	✓	✓ (BLS must be recertified every year)	✓

Please keep the originals and a copy of your documents

Submit a copy of all documents to the School



*Being ready is my
responsibility!!*

Immune Status Consent Form

School of Rehabilitation Therapy, Queen's University



Please read this document carefully, and be sure you understand it completely before signing below.

For purposes of this document, 'immune status' refers to the immunizations and/or testing that is required of students as per the policies of the School of Rehabilitation Therapy, Queen's University. This includes immunizations and/or testing related to diphtheria, hepatitis B, influenza, measles, mumps, rubella, pertussis, polio, tetanus, tuberculosis, and varicella (chicken-pox). Other agents of disease may be included as outlined in (3) below.

1. I understand that maintaining an accurate and up-to-date immune status record is an important responsibility of being a student, to protect my own health, as well as the health of the patients with whose care I will be involved.
2. While I understand that in general immunizations and health screening tests are voluntary procedures, I acknowledge that the procedures within the scope of this document are also a condition of enrolment within my chosen program of study. At any time, I may refuse any part of the proposed immunizations or testing and I understand that this may mean I may not be allowed to participate in clinical activities involving patients.
3. I understand that on occasion immune status recommendations or requirements may change based on new information and evidence, outbreaks of communicable diseases, or university policies. I accept that it is my responsibility to follow through on immune status recommendations or requirements of the facility while I am enrolled as a student.
4. I understand that my immune status personal health information will only be used by those directly involved with the School of Rehabilitation Therapy and only for the stated purposes of the program; this may include certain designated individuals directly involved with immunization screening and those coordinating clinical placements.
5. I agree that if required, the School of Rehabilitation Therapy may obtain and use from an external source, records of immunizations, testing, or treatment of infectious diseases that fall within the scope of this document. An external source includes but is not limited to my family physician, public health, specialty care, healthcare institutions, laboratories, and immunization registries.
6. I give permission for all or part of my immune status record to be disclosed to the occupational health departments of the facilities in which I will conduct my clinical placements, at the discretion of the School of Rehabilitation Therapy, so long as I remain a student within the facility.
7. If additional testing for or treatment of a communicable disease within the scope of this document is conducted by occupational health or infection control of a healthcare institution, or by public health or another institution in the community, I agree that this information may be received and used by the School of Rehabilitation Therapy, so long as I remain a student within the faculty.
8. I understand that I must maintain all original copies of my immune status record, for as long as I am a student in the School of Rehabilitation Therapy.
9. I understand that my immune status record will be kept secure while I am a student within the School of Rehabilitation Therapy, and I may request the document at the time of graduation, after which time the Immune Status Program will opt to destroy my immune status record in a secure and confidential manner, consistent with accepted methods of disposal of health records.

Student Signature

Date

Student Name (please print)_____



Proof of Immunization/Serologic Status
School of Rehabilitation Therapy
2026 - 2027
Confidential

Student Name	Program
--------------	---------

Please refer to the attached policy for clarification on specific sections of this form.

TUBERCULOSIS

Tuberculin Skin test (TST) done within the last 12 months

Option #1: 2 step Tuberculin Skin Test (TST) Documentation Required

	Date	mm in duration	Healthcare Professional Signature
Step 1			
Step 2			

Option #2: If a 2-step test was completed at least once in a lifetime, but more than 12 months ago, record these results above **AND** provide documentation of a single step TST.

	Date	mm in duration	Healthcare Professional Signature
Step 1			

Option #3: If TST is positive a chest x-ray is required

	Date	Chest X-Ray Results (Negative or Positive)	Student has no current signs or symptoms with active tuberculosis (Yes or No)	Healthcare Professional Signature
Chest X-RAY				

ANNOTATIONS

- Two steps should be 1-3 weeks apart
- 10mm or more induration is positive (or 5 mm or more for those infected with HIV, or in recent close contact with active Tb or with chest x-ray indicating healed TB)
- Results must be recorded as millimetres of induration (NOT "positive" or "negative")
- If either TST is positive this must be reported to the School and a chest x-ray report is required.
- Students with a positive test and a clear x-ray will not need another x-ray for 3 years unless symptomatic or exposed or a placement site requires it.

Student Name: _____

TETANUS/DIPHTHERIA/PERTUSSIS

Dose	Dose 1	Dose 2	Dose 3	Healthcare Professional Signature
Primary Series (DPT)				
Booster if last dose is more than 10 years	Booster Dose Date:			
TDAP or Adacel Booster				

ANNOTATIONS

- Students must provide proof of receipt of primary series of DPT vaccines **as well as a booster containing acellular pertussis vaccine (usually given in adolescence).**
- If primary series or booster was completed 10 or more years ago and the booster contained acellular pertussis, a TD booster is required.
- If there is no proof of primary series, one TDAP and two TD are required (the second at 2 months and the third at 6-12 months)
- Students are responsible for ensuring that these boosters remain up to date after admittance to the School of Rehabilitation Therapy.

VARICELLA

Titre	Date	Healthcare Professional Signature
☐ Reactive/Immune (+) ☐ Non-reactive (non-immune) (-)		

or

Dose	Date	Healthcare Professional Signature
Dose 1		
Dose 2		

ANNOTATIONS

- A history of disease alone is not sufficient evidence of immunity to varicella unless accompanied by laboratory confirmation.
- If non-reactive/non immune, immunization is required with documentation submitted to the School.
- Non-immune students who have a contraindication to receiving the varicella vaccine must inform the School upon registration and will be referred for advice.

Student Name: _____

MEASLES, MUMPS, RUBELLA (MMR)

Measles Titre	Date	Healthcare Professional Signature
☐ Reactive/Immune (+) ☐ Non-reactive (non-immune) (-)		

Mumps Titre	Date	Healthcare Professional Signature
☐ Reactive/Immune (+) ☐ Non-reactive (non-immune) (-)		

Rubella Titre	Date	Healthcare Professional Signature
☐ Reactive/Immune (+) ☐ Non-reactive (non-immune) (-)		

or

MMR Dose	Date	Healthcare Professional Signature
Dose 1		
Dose 2		

ANNOTATIONS:

- If non-reactive/non immune, immunization is required with documentation submitted to the School.
- or
- Students must provide evidence of **two** doses of measles, mumps, rubella (MMR) vaccine.

POLIO

Polio Series	Date	Healthcare Professional Signature
Dose 1		
Dose 2		
Dose 3		
Dose 4		
Dose 5		

ANNOTATIONS

- Students are required to provide documentation of a complete series of polio vaccine.
- Polio vaccine series consists of 5 doses for children up to 6 years old and 3 doses if primary series started after age 7 (adult dose). Four doses are sufficient if one was given after age 4.

Student Name: _____

HEPATITIS B All of section A must be completed

SECTION A

Hep B Series (2 doses if completed in grade 7)	Date	Healthcare Professional Signature
Dose 1		
Dose 2 (1 month following dose #1)		
Dose 3 (6 months following dose #1)		
Complete titre to determine surface antibody level (Anti-HBs)		
☐ Reactive/Immune (+) ☐ Non-reactive/non-immune (-)		

SECTION B

If non-immune give	Date	Healthcare Professional Signature
Dose 4		
Complete titre to determine surface antibody level (Anti-HBs)		
☐ Reactive/Immune (+) ☐ Non-reactive/non-immune (-)		
If non-immune complete second series		
Dose 5		
Dose 6		
Complete titre to determine surface antibody level (Anti-HBs)		
☐ Reactive/Immune (+) ☐ Non-reactive/non-immune (-)		

ANNOTATIONS

- If a student is non-reactive, but there is record of past immunization, the student will receive a booster and must have a repeat titre 1 month following the receipt of the booster.
- Students who continue to be non-immune after a booster must complete the second series and have a repeat titre.
- If the result of any HBsAg test is positive, the student will be referred for counselling by the Director of the School. They will also need HBeAg, anti-HBe and hepatitis B DNA levels.

COVID-19

Dose	Date	Healthcare Professional Signature
Dose 1		
Dose 2		
Booster		

ANNOTATIONS

- Two shots are required by many placement sites, at this time. Enter a booster if applicable.



School of Rehabilitation Therapy Procedures On: Immunization Screening Process and Clinical/Fieldwork Requirements

Immunization Screening Process

The following document provides information on immunizations and tests that are required for students enrolled in the School of Rehabilitation Therapy (SRT) OT and PT students. Students who cannot be immunized due to allergies or family planning reasons must provide a physician's note, and speak to their Academic Coordinator of Clinical Education or Fieldwork Coordinator.

Each section must be signed by a health professional. For students entering their first year of rehabilitation therapy programs, copies of this documentation are required to be submitted student's SharePoint folder. More information regarding SharePoint folders will be provided closer to your start date. Please ensure you keep the originals of all documents.

It is the responsibility of each student to maintain their health records and to take a photocopy to the institution where they will complete their placements. The absence of documentation will result in the student being deemed ineligible for clinical placements. The only exceptions to this are: Influenza shots and the third Hepatitis shot with serology. Influenza immunization is not usually available until late October, takes two weeks to become effective, and should be done as soon as the vaccine becomes available. It is understood that Hepatitis B immunization may not be complete by September 1st, but students must have completed the first and second shot.

****INDETERMINATE RESULTS ARE NOT SUFFICIENT. A REPORT FROM A HEALTH PROFESSIONAL WILL BE NEEDED TO CONFIRM IMMUNOLOGICAL STATUS**

1. Tuberculosis (TB)

Tuberculin skin test (TST): Most students will require a two-step TST upon admission to the School of Rehabilitation. Students with a previous two-step TST **documented** will usually only require a single TST on admission.

Providers of TSTs must be familiar with TST technique, contraindications to testing, and the various clinical situations where a particular TST result would be considered significant; for most (but not all) situations involving healthcare providers, a TST of **10 mm or greater** is considered significant. All TSTs must be read 48-72 hours after administration by a healthcare provider trained in reading TSTs, **with results recorded as millimetres of induration (NOT "positive" or "negative")**. Self-reading of TSTs is not acceptable.

Annual tuberculin skin testing: Annual TSTs **ARE** required for SRT OT and PT students.

Chest x-rays to screen for tuberculosis: Routine chest X-rays are NOT required for students. A chest x-ray report is only required in the following situations:

- A student has a newly-discovered significant TST
- A previously-documented TST was significant, and a chest x-ray was not done at the time, or the report is unavailable (if the report is available, submit this report, and a repeat chest x-ray is not required), or if the last x-ray was taken more than 3 years prior to the start of the program.
- There is a suspicion of active tuberculosis disease (involvement of a TB expert is recommended)

Students with a documented significant (positive) TST; positive IGRA; previous diagnosis of latent TB infection (LTBI) or active TB disease: Students must submit details of all follow-up measures taken.

2. Tetanus, diphtheria, and pertussis

Tetanus and diphtheria primary series: All students are required to provide the dates of a primary immunization series for both diphtheria and tetanus (usually completed in childhood). Students who have not had a primary series must complete a primary adult immunization series.

Pertussis booster: All students are required to provide the date of a pertussis booster (usually given as an adolescent). This should have been given as tetanus/diphtheria/acellular pertussis (Tdap).

Tetanus and diphtheria booster: All students are required to provide the date of a booster given within the previous 10 years.

3. Varicella (chickenpox)

A history of disease alone is not sufficient evidence of immunity to varicella.

Students require one of the following:

- a. Documentation of positive varicella serology;
OR
- b. Documentation of varicella vaccine, given as two doses at least a month apart for adults.

Those with negative serology should be vaccinated as outlined above.

4. Measles

A history of disease alone is not sufficient evidence of immunity to measles. One of the following two items is required for evidence of immunity:

- a. Documented evidence of vaccination with two doses of measles-containing vaccine, given at least a month apart, starting on or after the first birthday;
OR
- b. Documentation of positive measles serology.

Suggested approaches to specific clinical scenarios involving measles and/or mumps:

Only one dose of measles and/or mumps vaccine is documented after the first birthday:

Serology can be drawn to check for immunity. Alternatively, without checking serology, another dose of measles and/or mumps vaccine, given as MMR, can be administered at least one month after the first. **In general, vaccination is preferred over serological testing.** It is not necessary to do serological testing after immunization requirements have been met.

No measles and/or mumps vaccinations are documented after the first birthday: If a series was *likely* given in childhood, serology should be drawn. If this fails to show immunity, or if childhood vaccination was *unlikely* to have been given, two doses of vaccine, given as MMR, should be administered at least a month apart. It is not necessary to do serological testing if immunization requirements have been met.

5. Mumps

A history of disease alone is not sufficient evidence of immunity to mumps. One of the following two items is required for evidence of Immunity:

- a. Documented evidence of vaccination with **two doses** of mumps-containing vaccine, given at least a month apart, starting on or after the first birthday;
OR
- b. Documentation of positive mumps serology.

Suggested approaches to specific clinical scenarios involving measles and/or mumps:

Only one dose of measles and/or mumps vaccine is documented after the first birthday:

Serology can be drawn to check for immunity. Alternatively, without checking serology, another dose of measles and/or mumps vaccine, given as MMR, can be administered at least one month after the first. **In general, vaccination is preferred over serological testing.** It is not necessary to do serological testing if immunization requirements have been met.

No measles and/or mumps vaccinations are documented after the first birthday: If a series was *likely* given in childhood, serology should be drawn. If this fails to show immunity, or if childhood vaccination was *unlikely* to have been given, two doses of vaccine, given as MMR, should be administered at least a month apart. It is not necessary to do serological testing after immunization requirements have been met.

6. Rubella

A history of disease alone is not sufficient evidence of immunity to rubella unless accompanied by laboratory confirmation. One of the following two items is required for evidence of immunity:

- a. Documented evidence of vaccination with **two doses** of rubella-containing vaccine on or after the first birthday;
OR
- b. Documentation of positive rubella serology.

If serology is drawn and fails to show immunity to rubella, a single dose of rubella vaccine, given as MMR, should be administered. Serological testing after immunization is not necessary.

7. Polio

Primary series: All students are required to provide documentation that a primary immunization series for polio has been given (usually completed in childhood). Students who have not had a primary series must complete a primary adult immunization series (3 doses).

Polio booster: All students are required to provide the date of the last dose of polio. A repeat polio booster is not required for students who have received a complete primary series, unless work is expected in a high-risk area.

8. Hepatitis B

Students must have documented immunity to hepatitis B virus (HBV), demonstrated as a protective level of antibody to hepatitis B surface antigen (anti-HBs ≥ 10 mIU/mL). For the majority of new healthcare students in Canada this will be achieved through a complete series of three hepatitis B immunizations, and post-vaccination serology being drawn 1-2 months after the final dose of the series. The following recommendations are made for various clinical scenarios:

Students without a prior history of HBV vaccination: pre-vaccination serology is not necessary, unless the student hails from a background with a high likelihood of previous hepatitis B infection. A three-dose series should be given, at **0, 1, and 6 months**, with at least 1 month between the first and second dose, 2 months between the second and third dose, and 4 months between the first and the third dose. The rapid-dosing schedule for hepatitis B is not required for students. Post vaccination serology should be drawn 1-2 months after the final dose of the series.

Students with a history of an *incomplete* HBV vaccination series: The vaccination series does not need to be re-started; the final dose(s) of the series should be completed, regardless of how long ago the initial dose(s) were given, as long as the minimal intervals between vaccines are respected (see above). Post-vaccination serology should be drawn at 1-2 months after the final dose. Vaccines produced by different manufacturers can be used interchangeably, provided that the age appropriate dosages are used.

Students with a history of a *complete* HBV vaccination series: Serology should be drawn for anti-HBs immediately, although it should be recognized that serology can be falsely negative if drawn > 6 months after the initial vaccination series was completed. If protective levels are shown (anti-HBs ≥ 10 mIU/mL), no further work-up is indicated. If anti-HBs levels are lower than this or absent, a single hepatitis B vaccination should be given immediately, and repeat serology drawn one month later. If anti-HBs levels are still not protective, the second and third dose of vaccine should be given at the appropriate times to complete the second series, with post-vaccination serology for anti-HBs drawn 1-2 months after the final dose.

Hepatitis A: Hepatitis A vaccination is neither required nor recommended for the majority of healthcare providers practicing within Canada at this time. However, some students may wish to be vaccinated against hepatitis A at the same time as hepatitis B, using a combination hepatitis A and B vaccine.

9. Influenza (TO BE SUBMITTED OCT/NOV ANNUALLY)

Annual influenza immunization is strongly recommended for all healthcare providers, including students in healthcare disciplines. All healthcare providers including students receive influenza vaccine at no charge. Influenza immunization should be completed and documentation submitted to the OnQ Student Resource Page. Students who wish to decline influenza vaccination for whatever reason must understand that this means they may not be allowed to participate in clinical activities involving patients.

10. COVID-19

Two doses of COVID-19 vaccination are required for many clinical placements. Students should follow NACI recommendations on the use of COVID-19 vaccines (<https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html>). Students who choose not to have COVID-19 vaccination should be notified that university and hospital policies may preclude them from clinical placements that are curricular requirements.

Students can access Student Wellness Services at
<http://www.queensu.ca/studentwellness/health-services>

Standard First Aid and Cardiopulmonary Resuscitation (CPR) Training

Standard First Aid with BLS (4-hour min) (Red Cross, Lifesaving Society, St. John's Ambulance) **must be complete and a photocopy submitted to OnQ by September 1st.** Current certification must be maintained throughout the 24-month program.

- **CPR/First Aid must be recertified prior to the expiry date on the card.** Any recertification must occur **prior to the assignment** of clinical placements (not for the placements themselves). Some placement sites require recertification yearly.
- **BLS must be recertified every year, regardless of the expiry date on the card.** This recertification must occur **prior to the assignment** of clinical placements (not for the placements themselves). Some placement sites require recertification yearly.

Proof of certification should be saved to the Student's SharePoint folder.

Criminal Record Checks

The School of Rehabilitation Therapy requires that all students complete a Criminal Record Check **including vulnerable sector screening annually**, as it is a mandatory requirement for many of our clinical placement facilities. Please refer to the Faculty of Health Sciences (FHS) Police Records Check Policy <https://meds.queensu.ca/academics/postgraduate/current/policies/police-records-check>

All criminal record checks for incoming students must be submitted with your immunization documents by August 15 of each year in the program. A copy of this documentation should be submitted to the student's SharePoint folder. Failure to do so will result in delayed placement selection.

PLEASE NOTE: If you live in Alberta or Manitoba, you must complete your check in that province as they may not supply information to other provinces.

The School of Rehabilitation Therapy **REQUIRES** a *vulnerable sector screening (disclosure for a sexual offense for which a pardon has been granted or issued)*.

The following information should be entered:

- Description of Position: **Physical Therapy or Occupational Therapy student**
- Name of Organization: **School of Rehabilitation Therapy, Queen's University, 31 George St., Kingston ON K7L 3N6**
- Details: **Will be providing physical therapy assessment and treatment to young children, adults with communication and intellectual disabilities, and the frail elderly.**

Because many placement sites will require a check that is less than one year old, it is best that to wait until at least July before obtaining one. All students are required to have a new criminal record check completed for second year.

PLEASE NOTE: Some placement sites require a check that is completed 3 or 6 months prior to the start of placement. Students may have to complete more than one CRC in a year.

If your Criminal Record Check is “not clear”, please refer to the Police Records Check policy with the Faculty of Health Sciences.
<https://meds.queensu.ca/academics/postgraduate/current/policies/police-records-check>

Health and Safety Training

Queen’s University requires all Graduate students to complete Environmental Health and Safety Awareness training. Environmental Health and Safety training is mandated under the Occupational Health and Safety Act. It will be, completed online, and consists of four modules and a final quiz. Approximately five (5) business days after completing the training a certificate of completion will be sent via email for submission to the Student’s SharePoint folder. Further information will follow which will include instructions and links to complete this training.

Accessibility for Ontarians with Disabilities Act (AODA) Training

Accessibility is about giving people of all abilities opportunities to participate fully in everyday life. Queen's is committed to fostering a campus community that is accessible and inclusive for all individuals.

The School of Rehabilitation Therapy requires that all students complete Accessibility for Ontarians with Disabilities Act (AODA) training. This training is a mandatory requirement for placements within many of our clinical placement facilities. Training can be completed online and will consist of the following three (3) modules; Accessible Customer Service, Human Rights 101 and Access Forward. After completing each module, you will receive a confirmation email. Do not delete these emails, as proof of completion must be submitted to the student’s SharePoint folder. Further information will follow which will include instructions and links to complete this training.

Workplace Hazardous Materials Information System (WHMIS) Training

The School of Rehabilitation Therapy requires that all students complete Workplace Hazardous Materials Information System (WHMIS) training. This training is also, a mandatory requirement for placements within many of our clinical placement facilities. WHMIS training will be completed through an online module. Proof of completion must be submitted to the Student’s SharePoint folder. Further information will follow which will include instructions and links to complete this training.

Routine Precautions

In accordance with partner sites’ policies, all students will be required to undergo N95 respirator mask-fit testing during orientation week, participate in online training modules and a lab session during their studies. All students will be required to complete online modules related to:

- Chain of Transmission and Risk Assessment;
- Healthcare Provider Controls;
- Control of the Environment; and
- Additional Precautions.

Further information will follow which will include instructions and links to complete this training. Each student must submit proof of completion to the Student’s SharePoint folder. All components (mask-fit, online modules and lab session) are required to progress to clinical placement/fieldwork.

Non-Violent Crisis Intervention (NVCi) Training

In accordance with partner sites' policies, all students will be required to complete NVCi training and maintain their certification throughout the duration of their studies. All first year students must complete the blended training, including online modules and lab components. The training follows the curriculum outlined by the Crisis Prevention Institute (CPI). The focus will be on the preventing and defusing situations in clinical settings. Training will be offered via online modules before entering year one and via a lab session within the School of Rehabilitation Therapy as part of fieldwork/clinical placement preparation. Students will be required to pay for the cost associated with accessing the online modules through the CPI. Students will be required to pay for the course fee via the SRT online store prior to accessing the modules and/or participating in the lab-based training. Students who do not pay for their course material or who are absent from the provided training, will be required to access training through a publicly available source (e.g. the CPI, a community college or community organization) at their expense.

Students can access information about NVCi at: <http://www.crisisprevention.com/Specialties/Nonviolent-Crisis-Intervention>.

In the event that a student has previously completed NVCi training, the student will be required to provide proof of certification to the Student's SharePoint folder. A student with a valid certification should note that recertification will be required every two years and may not be offered by the School of Rehabilitation Therapy.



Student Declaration of Understanding

Workplace Safety and Insurance Board or Private Insurance Coverage For Students on Program Related Placements

Student coverage while on placement:

The government of Ontario, through the Ministry of Colleges and Universities (MCU), reimburses WSIB for the cost of benefits it pays to Student Trainees enrolled in an approved program at a Training Agency (university). Students are eligible for Workplace Safety Insurance Act (WSIA) coverage if they suffer a workplace illness or injury while on an unpaid work placement in Ontario with a facility that is covered by the WSIA.

For students whose unpaid work placement is at a facility in Ontario that is not covered under the WSIA, or, whose unpaid work placement is at a facility outside of Ontario (international and other Canadian jurisdictions), MCU also provides private insurance through the Chubb Insurance Company of Canada. This insurance covers workplace injuries only (this insurance does not cover workplace illness, including COVID-19).

PLEASE NOTE for International Students: Workplace insurance coverage from WSIB, Chubb Insurance or the University **will not apply** to international students who sustain a workplace injury or illness when participating in work placements in their home country. You may have coverage through your placement employer or your home country. It is your responsibility to inform yourself as to the details of any coverage that may be available if you do a placement in your home country.

Students are also advised to maintain insurance for extended health care benefits through the applicable student insurance plan or other insurance plan.

Please be advised that Queen's University will be required to disclose personal information to MCU relating to the unpaid work placement and any WSIB claim or any claim made to the Chubb Insurance Company of Canada.

This below Declaration must be completed, signed, and provided to your placement coordinator prior to the commencement of any unpaid work placement.

Declaration:

I have read the above information and understand that WSIB or private insurance coverage will be provided through the MCU while I am on an unpaid placement arranged by the university as part of my program of study.

I agree that, over the course of my placement, I will participate in and comply with all safety-related training and procedures required by both the University and the placement employer. I will provide the University with written confirmation that I have received safety training.

I will promptly inform my placement employer of any safety concerns. If these concerns are not resolved, I will contact the University's placement coordinator within my faculty and notify them of any unresolved safety concerns.

I understand that all injuries or illnesses I experience while participating in an unpaid work placement must be immediately reported to the placement employer and my Queen's University placement coordinator. I also understand that an MCU Postsecondary Student Unpaid Work Placement Workplace Insurance Claim form must be completed and signed in the event of a workplace injury or illness during my placement and must be submitted to the University placement coordinator. In the event of a workplace injury or illness during my placement, I also agree to maintain regular contact with the University and to provide the University with information relating to any restrictions and my ability to return to the placement.

I also understand that multiple potential sources of COVID-19 may now exist creating challenges in establishing work-relatedness for a COVID-19 related claim and I have read the [WSIBs Document](#) about how it addresses claims related to COVID-19.

I understand the implications and have had any questions answered to my satisfaction.

Student Name:	Student Signature:	
Program:	Date:	
Placement Location:	Total Placement Hours	Visa Student? ☐ Y ☐ N
Parent/Legal Guardian's Name (for student less than 18 years of age) <i>please print</i> :		
Signature:		Date

Student Name: _____

Placement Location & Preceptor: _____

Level 1 Learning Objectives

A. Occupational Therapy Expertise

- Establishes professional relationships with the client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Introduces occupational therapist's role in own words to a client or another professional.
- Demonstrates awareness of the importance to collect information from multiple sources and use different methods of assessment.
- Seeks to understand the client's perspective of opportunities and barriers affecting occupation (e.g. accessing, initiating or sustaining participation).
- Gathers relevant information from the client during the interview.
- Seeks to understand the purpose of an occupation and its impact on the client.
- Shares understanding of a client's occupational participation, occupational schedule or profile.
- Explains how a change in one domain of participation may affect another.
- Proposes a modification of an activity or occupation, based upon the client's occupational participation and profile as identified by the preceptor (supervisor).

SMART learning goal for domain A.
End of Placement Reflection

B. Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Extracts information appropriate to the specific nature of occupational therapy (e.g. client's file, organization's documents).
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients.
- Communicates with others, as needed (e.g. professionals, family).
- Takes into account the schedules and availability of others (e.g. by waiting their turn or asking permission to observe rather than imposing).

Student Name: _____

Placement Location & Preceptor: _____

- Drafts a report (e.g. observations, progress note) congruent with the nature of the occupational therapy context.
- Participates actively in supervisory discussions.
- Shares insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Drafts a report anchored in a conceptual/theoretical model.

SMART learning goal for domain B.
End of Placement Reflection

C. Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation.
- Considers cultural differences and client's values when interacting.
- Demonstrates an interest in potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments).
- Shows awareness of their own positionality (e.g. privileged position, own identity and power).
- Applies anti-oppressive and trauma-informed approaches and gender-affirmative language in practice.

SMART learning goal for domain C.
End of Placement Reflection

D. Excellence in Practice

- Identifies learning goals through self-assessment and demonstrates a willingness to improve.

Student Name: _____

Placement Location & Preceptor: _____

- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands.
- Draws on knowledge and evidence applicable to the practice context.
- Asks for help, refers to or discusses with the preceptor (supervisor) how to proceed.
- Shares learning experiences with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.

SMART learning goal for domain D.
End of Placement Reflection

Student Name: _____

Placement Location & Preceptor: _____

E. Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life.
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct.
- Respects the Code of Ethics.
- Respects confidentiality.
- Respects clients' occupational rights.
- Considers risk management strategies to ensure safety.

SMART learning goal for domain E.
End of Placement Reflection

F. Engagement with the Profession

- Draws on knowledge learned in school and reflects on application in practice.
- Is prepared, asks questions, reads and discusses.
- Initiates self-directed learning without prompting.
- Identifies knowledge gaps in practice.
- Demonstrates awareness about the work of others such as assistants, volunteers and other team members.
- Demonstrates role modeling when appropriate.
- Describes to others (e.g. clients, family and staff) the benefits of activity-occupation-participation.
- Seeks peer to peer learning opportunities when applicable.

SMART learning goal for domain F.

Student Name: _____

Placement Location & Preceptor: _____

End of Placement Reflection

Level 2 Learning Objectives

A. Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reflects client's occupational expectations in own words, without making value judgments.
- Discusses with the preceptor (supervisor) their plan for assessment (e.g. model, method, measurement instruments, justification of choices based on knowledge).
- Identifies areas requiring further in-depth assessment and proposes methods with justification (e.g. activity observations, standardised tests).
- Prepares and collects information as per assessment plan.
- Anchors a thorough analysis in a theoretical approach, consistent with the concepts inherent in the chosen model.
- Formulates goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client.

SMART learning goal for domain A.

Student Name: _____

Placement Location & Preceptor: _____

End of Placement Reflection

B. Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Extracts information appropriate to the specific nature of occupational therapy (e.g. client's file, organization's documents)
- Recognises own role and responsibilities, considering other team members contributions.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Occasionally applies techniques such as reflection or validation.
- Organises own schedule while considering the schedules and availability of others.
- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear and concise.
- Initiates and actively participates in supervisory discussions.
- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and questions their individual contribution.
- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

SMART learning goal for domain B.
End of Placement Reflection

Student Name: _____

Placement Location & Preceptor: _____

C. Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when interacting with them.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments).
- Shows awareness of their own positionality (e.g. privileged position, own identity and power).
- Applies anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Considers the availability/accessibility of resources (e.g. human, physical, financial) identified as 'ideal' for a given client, considering the impact on other clients.
- Questions the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Identifies structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

SMART learning goal for domain C.
End of Placement Reflection

D. Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands.
- Draws on knowledge and evidence applicable to the practice context.
- Acknowledges gaps in knowledge, skills and attitudes.
- Asks for help, refers to or discusses with the preceptor (supervisor) how to proceed.
- Explores recurring themes of learning experiences and discusses with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).
- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

Student Name: _____

Placement Location & Preceptor: _____

SMART learning goal for domain D.
End of Placement Reflection

E. Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and reflects on courses of action with the preceptor (supervisor).
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Considers risk management strategies to ensure safety.

SMART learning goal for domain E.
End of Placement Reflection

F. Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and reflects on application in practice.
- Is prepared, asks questions, proposes potential answers, reads, and discusses.

Student Name: _____

Placement Location & Preceptor: _____

- Takes initiative in proposing evidence.
- Initiates filling knowledge gaps in practice.
- Balances occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Initiates role modeling when appropriate.
- Explains to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.

SMART learning goal for domain F.
End of Placement Reflection

Level 3 Learning Objectives

A. Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reframes, reformulates and clarifies the reason for the occupational therapy referral/consultation.
- Develops a comprehensive assessment plan (e.g. model, method, measurement instruments, timetable, justification of choices based on knowledge).
- Justifies choices (e.g. models, assessments, interventions) with evidence-based data.
- Gathers information as planned in the assessment plan, while respecting the planned timeline.
- Anchors the clinical process in a theoretical approach, remaining consistent to the concepts inherent in the chosen model.
- Interprets the results of assessments in such a way as to identify what actions to take.
- Establishes and prioritises goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client while identifying the resources required to implement the intervention plan and recognising their own limits.
- Implements an intervention in line with the plan and recognizes any need to make adjustments.

Student Name: _____

Placement Location & Preceptor: _____

- Follows standards relating to assignment to assistants, where applicable.

SMART learning goal for domain A.
End of Placement Reflection

B. Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Gathers relevant information from the client during the encounter.
- Explains role and responsibilities, considering other team members' contributions.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Integrates communication techniques (e.g. reflection or validation).
- Organises own schedule while considering the schedules and availability of others.
- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear, concise and in a timely manner.
- Initiates and actively participates in supervisory discussions.
- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and contributes to its resolution.
- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

SMART learning goal for domain B.

Student Name: _____

Placement Location & Preceptor: _____

End of Placement Reflection

C. Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when co-creating a culturally safer space.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments) and proposes potential alternatives.
- Monitors their own positionality (e.g. privileged position, own identity and power).
- Integrates anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Monitors the availability/accessibility of resources (e.g. human, physical, financial) for a given client, considering the impact on other clients.
- Analyses the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Explains structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

SMART learning goal for domain C.
End of Placement Reflection

D. Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands considering context (e.g. socioeconomic, ecological, political, technological).
- Draws on knowledge and evidence applicable to the practice context.
- Reflects on gaps in knowledge, skills and attitudes.
- Asks targeted questions, refers to or discusses with the preceptor (supervisor) how to proceed.
- Evaluates learning experiences and shares insights with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Provides useful feedback to others.

Student Name: _____

Placement Location & Preceptor: _____

- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).
- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

SMART learning goal for domain D.
End of Placement Reflection

E. Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.
- Identifies potential professional boundary crossing or violation and reflects on courses of action with the preceptor (supervisor).
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations, and the establishment's code of conduct consistently.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and develops an action plan with the preceptor (supervisor).
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Applies risk management strategies to ensure safety.

SMART learning goal for domain E.
End of Placement Reflection

Student Name: _____

Placement Location & Preceptor: _____

F. Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and analyses application in practice.
- Takes initiative in proposing evidence, considering scientific qualities (critical thinking) and applicability in the clinical context.
- Consistently fills knowledge gaps in practice.
- Contributes to building occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Integrates role modeling.
- Promotes to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.

SMART learning goal for domain F.
End of Placement Reflection

Level 4 Learning Objectives

A. Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reframes, reformulates and clarifies the reason for the occupational therapy referral/consultation.
- Develops a comprehensive assessment plan (e.g. model, method, measurement instruments, timetable, justification of choices based on knowledge) and adjusts assessment plan when necessary.
- Justifies choices (e.g. models, assessments, interventions) with evidence-based data.
- Gathers information as planned in the assessment plan, while respecting the planned timeline.

Student Name: _____

Placement Location & Preceptor: _____

- Anchors the clinical process in a theoretical approach, remaining consistent to the concepts inherent in the chosen model.
- Interprets the results of assessments in such a way as to identify what actions to take.
- Establishes and prioritises goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client while anticipating the resources required to implement the intervention plan and recognising their own limits.
- Adjusts the intervention plan when necessary, including the need to conclude or transition to other services.
- Follows standards relating to assignment to assistants, where applicable and identifies situations where assignment to assistants may be beneficial.

SMART learning goal for domain A.
End of Placement Reflection

B. Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Gathers relevant information from the client during the encounter.
- Explains role and responsibilities, considering complementarity with other team members.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Integrates and adjusts communication techniques (e.g. reflection or validation).
- Organises own schedule while considering the schedules and availability of others.
- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear, concise and in a timely manner.

Student Name: _____

Placement Location & Preceptor: _____

- Initiates and actively participates in supervisory discussions.
- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and contributes to its resolution in a timely manner.
- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

SMART learning goal for domain B.
End of Placement Reflection

C. Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when co-creating a culturally safer space.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments) and acts when possible.
- Monitors their own positionality (e.g. privileged position, own identity and power).
- Integrates anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Integrates the availability/accessibility of resources (e.g. human, physical, financial) for a given client, considering the impact on other clients.
- Critiques the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Critiques structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

SMART learning goal for domain C.
End of Placement Reflection

Student Name: _____

Placement Location & Preceptor: _____

D. Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands considering context (e.g. socioeconomic, ecological, political, technological).
- Draws on knowledge and evidence applicable to the practice context.
- Anticipates gaps in knowledge, skills and attitudes.
- Asks targeted questions, refers to or discusses with the preceptor (supervisor) how to proceed.
- Evaluates learning experiences and shares insights with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Provides useful feedback to others.
- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).
- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

SMART learning goal for domain D.
End of Placement Reflection

E. Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.

Student Name: _____

Placement Location & Preceptor: _____

- Identifies potential professional boundary crossing or violation and reflects on courses of action with the preceptor (supervisor).
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct at all times.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and develops and justifies an action plan.
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Evaluates and justifies risk management strategies to ensure safety.

SMART learning goal for domain E.
End of Placement Reflection

F. Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and critiques application in practice.
- Takes initiative in proposing evidence, considering scientific qualities (critical thinking) and applicability in the clinical context.
- Consistently fills knowledge gaps in practice.
- Contributes to building occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Integrates role modeling.
- Justifies to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.

SMART learning goal for domain F.
End of Placement Reflection

Student Name: _____

Placement Location & Preceptor: _____

About Fieldwork Education

Fieldwork education is an essential component of an occupational therapy professional educational program and comprises approximately one-third of the curriculum.

It is a collaborative process that involves a variety of supervised field experiences related to the practice of occupational therapy.

The aim is to integrate and apply academic and theoretical knowledge in a practice setting in the three domains of learning: skills, attitudes and knowledge, and to foster the development of clinical reasoning and professional identity.

School of Rehabilitation Therapy

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SAMPLE RESOURCES

Preceptor Education Program (PEP) for Health Professionals and Students (available at <http://www.preceptor.ca/>);

E-tips for Health Professionals and Students (available at <http://www.practiceeducation.ca/>);

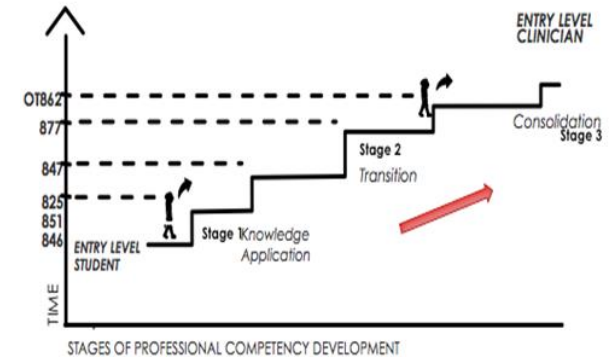
Learning Management System Resources (onQ)
<https://www.queensu.ca/onqsupport/students;>

CAOT <http://www.caot.ca/>

COTO <http://www.coto.org/>

Passport to Fieldwork

This resource is intended to guide MScOT students in preparing for clinical learning in OT846, OT847 and OT877





Fieldwork Package Checklist

	Immunization Record
	Proof of Flu Shot
	CPR – HCP & First Aid Certification
	Declaration of Privacy Legislation
	Routine Precautions Education
	Proof of N95 Mask-Fit Testing (pocket card)
	CV or Resume
	NVCI training card

Please Note... Each site/facility may have specific requirements about which documents need to be sent and when they need to be sent. Make sure you respond to site/facility request(s) for information. For in-catchment sites, please review the Fieldwork Site Profiles (FS-Pro) in your LMS. If you are unsure, you should check with the site coordinator or the main office at the SRT.

TO DO (before placement):

2-6 Months Before*

- ☐ Apply for placement through in-catchment, CFPSS or NOSM.

1 Month Before*

- ☐ Arrange housing if necessary (utilize accommodations list).

3-6 Weeks Before*

- ☐ Send introductory letter to the site coordinator and include all required information for your site.

2 Weeks Before*

- ☐ Email the preceptor or site coordinator to ensure that my Fieldwork Package arrived at the site. Ask what I need to do to prepare for placement.

1 Week Before*

- ☐ Complete preparatory readings or work as needed and/or instructed by the site coordinator.

- ☐ Review previous fieldwork profile (for placement 2 and 3).

****dates are approximate; follow the exact date guidelines provided by your University Fieldwork Coordinator.***



TO DO (during placement):

- ☐ Report any more than 2 sick days to the University Fieldwork Coordinator.

BY THE END OF WEEK 1

- ☐ Complete your learning objectives for each competency of the CBFE-OT. You should have 1-2 SMART learning objectives for EACH competency.

MID-TERM

- ☐ Fill out the Student Placement Feedback Form.
- ☐ Complete a self-evaluation mid-term CBFE-OT on your own performance.
- ☐ Schedule a mid-term meeting with your preceptor to review your CBFE-OT, the preceptor's mid-term CBFE-OT and your Student Placement Feedback Form.

FINAL

- ☐ Complete the Student Placement Feedback Form.
- ☐ Complete a self-evaluation final CBFE-OT on your own performance.
- ☐ Schedule a final meeting with your preceptor to review your CBFE-OT, the preceptor's final CBFE-OT and your Student Placement Feedback Form.
- ☐ Request a copy of the preceptor's CBFE-OT.
- ☐ Ensure signatures applied in all fields.

Fieldwork Indicators by Level

Examples of Fieldwork Indicators for level 1

Occupational Therapy Expertise

- Establishes professional relationships with the client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Introduces occupational therapist's role in own words to a client or another professional.
- Demonstrates awareness of the importance to collect information from multiple sources and use different methods of assessment.
- Seeks to understand the client's perspective of opportunities and barriers affecting occupation (e.g. accessing, initiating or sustaining participation).
- Gathers relevant information from the client during the interview.
- Seeks to understand the purpose of an occupation and its impact on the client.
- Shares understanding of a client's occupational participation, occupational schedule or profile.
- Explains how a change in one domain of participation may affect another.
- Proposes a modification of an activity or occupation, based upon the client's occupational participation and profile as identified by the preceptor (supervisor).

Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Extracts information appropriate to the specific nature of occupational therapy (e.g. client's file, organization's documents).
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients.
- Communicates with others, as needed (e.g. professionals, family).
- Takes into account the schedules and availability of others (e.g. by waiting their turn or asking permission to observe rather than imposing).
- Drafts a report (e.g. observations, progress note) congruent with the nature of the occupational therapy context.
- Participates actively in supervisory discussions.
- Shares insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Drafts a report anchored in a conceptual/theoretical model.

Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation.

- Considers cultural differences and client's values when interacting.
- Demonstrates an interest in potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments).
- Shows awareness of their own positionality (e.g. privileged position, own identity and power).
- Applies anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.

Excellence in Practice

- Identifies learning goals through self-assessment and demonstrates a willingness to improve.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands.
- Draws on knowledge and evidence applicable to the practice context.
- Asks for help, refers to or discusses with the preceptor (supervisor) how to proceed.
- Shares learning experiences with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.

Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life.
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct.
- Respects the Code of Ethics.
- Respects confidentiality.
- Respects clients' occupational rights.
- Considers risk management strategies to ensure safety.

Engagement with the Profession

- Draws on knowledge learned in school and reflects on application in practice.
- Is prepared, asks questions, reads and discusses.
- Initiates self-directed learning without prompting.
- Identifies knowledge gaps in practice.
- Demonstrates awareness about the work of others such as assistants, volunteers and other team members.
- Demonstrates role modeling when appropriate.
- Describes to others (e.g. clients, family and staff) the benefits of activity-occupation-participation.
- Seeks peer to peer learning opportunities when applicable.

Examples of Fieldwork Indicators for level 2

Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reflects client's occupational expectations in own words, without making value judgments.
- Discusses with the preceptor (supervisor) their plan for assessment (e.g. model, method, measurement instruments, justification of choices based on knowledge).
- Identifies areas requiring further in-depth assessment and proposes methods with justification (e.g. activity observations, standardised tests).
- Prepares and collects information as per assessment plan.
- Anchors a thorough analysis in a theoretical approach, consistent with the concepts inherent in the chosen model.
- Formulates goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client.

Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Extracts information appropriate to the specific nature of occupational therapy (e.g. client's file, organization's documents).
- Recognises own role and responsibilities, considering other team members contributions.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Occasionally applies techniques such as reflection or validation.
- Organises own schedule while considering the schedules and availability of others.
- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear and concise.
- Initiates and actively participates in supervisory discussions.
- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and questions their individual contribution.

- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when interacting with them.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments).
- Shows awareness of their own positionality (e.g. privileged position, own identity and power).
- Applies anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Considers the availability/accessibility of resources (e.g. human, physical, financial) identified as 'ideal' for a given client, considering the impact on other clients.
- Questions the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Identifies structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands.
- Draws on knowledge and evidence applicable to the practice context.
- Acknowledges gaps in knowledge, skills and attitudes.
- Asks for help, refers to or discusses with the preceptor (supervisor) how to proceed.
- Explores recurring themes of learning experiences and discusses with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).
- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and reflects on courses of action with the preceptor (supervisor).
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Considers risk management strategies to ensure safety.

Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and reflects on application in practice.
- Is prepared, asks questions, proposes potential answers, reads, and discusses.
- Takes initiative in proposing evidence.
- Initiates filling knowledge gaps in practice.
- Balances occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Initiates role modeling when appropriate.
- Explains to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.

Examples of Fieldwork Indicators for level 3

Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reframes, reformulates and clarifies the reason for the occupational therapy referral/consultation.
- Develops a comprehensive assessment plan (e.g. model, method, measurement instruments, timetable, justification of choices based on knowledge).
- Justifies choices (e.g. models, assessments, interventions) with evidence-based data.
- Gathers information as planned in the assessment plan, while respecting the planned timeline.
- Anchors the clinical process in a theoretical approach, remaining consistent to the concepts inherent in the chosen model.
- Interprets the results of assessments in such a way as to identify what actions to take.
- Establishes and prioritises goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client while identifying the resources required to implement the intervention plan and recognising their own limits.
- Implements an intervention in line with the plan and recognizes any need to make adjustments.
- Follows standards relating to assignment to assistants, where applicable.

Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Gathers relevant information from the client during the encounter.
- Explains role and responsibilities, considering other team members' contributions.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Integrates communication techniques (e.g. reflection or validation).
- Organises own schedule while considering the schedules and availability of others.
- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear, concise and in a timely manner.
- Initiates and actively participates in supervisory discussions.

- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and contributes to its resolution.
- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when co-creating a culturally safer space.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments) and proposes potential alternatives.
- Monitors their own positionality (e.g. privileged position, own identity and power).
- Integrates anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Monitors the availability/accessibility of resources (e.g. human, physical, financial) for a given client, considering the impact on other clients.
- Analyses the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Explains structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands considering context (e.g. socioeconomic, ecological, political, technological).
- Draws on knowledge and evidence applicable to the practice context.
- Reflects on gaps in knowledge, skills and attitudes.
- Asks targeted questions, refers to or discusses with the preceptor (supervisor) how to proceed.
- Evaluates learning experiences and shares insights with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Provides useful feedback to others.
- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).

- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.
- Identifies potential professional boundary crossing or violation and reflects on courses of action with the preceptor (supervisor).
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations, and the establishment's code of conduct consistently.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and develops an action plan with the preceptor (supervisor).
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Applies risk management strategies to ensure safety.

Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and analyses application in practice.
- Takes initiative in proposing evidence, considering scientific qualities (critical thinking) and applicability in the clinical context.
- Consistently fills knowledge gaps in practice.
- Contributes to building occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Integrates role modeling.
- Promotes to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.

Examples of Fieldwork Indicators for level 4

Occupational Therapy Expertise

- Establishes professional relationships with client demonstrating trust and respect (e.g. interest, curiosity and empathy).
- Reframes, reformulates and clarifies the reason for the occupational therapy referral/consultation.
- Develops a comprehensive assessment plan (e.g. model, method, measurement instruments, timetable, justification of choices based on knowledge) and adjusts assessment plan when necessary.
- Justifies choices (e.g. models, assessments, interventions) with evidence-based data.
- Gathers information as planned in the assessment plan, while respecting the planned timeline.
- Anchors the clinical process in a theoretical approach, remaining consistent to the concepts inherent in the chosen model.
- Interprets the results of assessments in such a way as to identify what actions to take.
- Establishes and prioritises goals (e.g. SMART) collaboratively.
- Plans and implements a meaningful intervention with the client while anticipating the resources required to implement the intervention plan and recognising their own limits.
- Adjusts the intervention plan when necessary, including the need to conclude or transition to other services.
- Follows standards relating to assignment to assistants, where applicable and identifies situations where assignment to assistants may be beneficial.

Communication and Collaboration

- Complies with facility rules for accessing/transmitting information.
- Gathers relevant information from the client during the encounter.
- Explains role and responsibilities, considering complementarity with other team members.
- Uses technology appropriately and responsibly.
- Presents written information in a structured manner, respecting language rules (e.g. spelling, syntax).
- Uses professional, accurate and client-oriented language (e.g. verbal, non-verbal and written).
- Demonstrates respect at all times towards clients (including relatives) and team members.
- Is respectful in all exchanges (e.g. avoids interrupting, expresses self tactfully, gives opinion diplomatically).
- Expresses self verbally, clearly and concisely, while reflecting sensitivity to power imbalance.
- Takes non-verbal communication into account when interacting with clients and adjusts accordingly.
- Initiates communication with others, as needed (e.g. professionals, family).
- Takes part in meetings and, where relevant, gives opinions and asks questions.
- Integrates and adjusts communication techniques (e.g. reflection or validation).
- Organises own schedule while considering the schedules and availability of others.

- Completes a report (e.g. initial assessment, observations, progress note) that is accurate, clear, concise and in a timely manner.
- Initiates and actively participates in supervisory discussions.
- Collaborates to share insights (e.g. occupational therapist's roles, own perceptions) with the preceptor (supervisor) and other team members.
- Recognises the presence of tension in a group and contributes to its resolution in a timely manner.
- Contributes to team decisions and explains their reasoning in cases where opinions differ.
- Synthesises the information and observations gathered, writes an analysis aligned with the chosen theoretical occupational therapy approach.

Culture, Equity, and Justice

- Demonstrates respect and humility when interacting with clients.
- Integrates an understanding of health, well-being, healing and occupational participation into decision making (e.g. assessment and intervention).
- Integrates cultural differences and client's values when co-creating a culturally safer space.
- Questions the potential influences of a practice environment (e.g. culturally safer, anti-racist, anti-ableist and inclusive environments) and acts when possible.
- Monitors their own positionality (e.g. privileged position, own identity and power).
- Integrates anti-oppressive and trauma-informed approaches, and gender-affirmative language in practice.
- Integrates the availability/accessibility of resources (e.g. human, physical, financial) for a given client, considering the impact on other clients.
- Critiques the associated costs and resources required when engaging in planning (e.g. client assessment or intervention).
- Critiques structural factors (e.g. colonisation, historical, biases and social structures that privilege or marginalise) that could potentially influence occupational participation over time.

Excellence in Practice

- Identifies learning goals through self-assessment and implements feedback on learning goals.
- Asks questions and shares own knowledge applicable to the practice context.
- Uses work resources and responds to demands considering context (e.g. socioeconomic, ecological, political, technological).
- Draws on knowledge and evidence applicable to the practice context.
- Anticipates gaps in knowledge, skills and attitudes.
- Asks targeted questions, refers to or discusses with the preceptor (supervisor) how to proceed.
- Evaluates learning experiences and shares insights with the preceptor (supervisor).
- Demonstrates receptiveness to feedback.
- Integrates feedback into future actions.
- Provides useful feedback to others.

- Completes a task within a reasonable timeframe (considering the level of learner and practice context).
- Balances work activities (deemed realistic) within work schedule.
- Demonstrates reflective practice following pre-established learning contract (e.g. reflective journal).
- Identifies priority competencies to be developed with an action plan (e.g. learning contract).
- Justifies decisions (e.g. models, evaluations, interventions) with evidence.

Professional Responsibility

- Is diligent, punctual and presents self as a learner.
- Dresses in accordance with the dress code of the environment.
- Demonstrates distinction between personal and professional life while establishing and maintaining professional boundaries.
- Identifies potential professional boundary crossing or violation and reflects on courses of action with the preceptor (supervisor).
- Presents self systematically as a student occupational therapist and obtains consent.
- Behaves with integrity, honesty, fairness and respect.
- Respects laws, regulations and the establishment's code of conduct at all times.
- Respects the Code of Ethics and applies ethical principles (e.g. non-maleficence, beneficence, justice, fidelity, autonomy, truthfulness).
- Identifies ethical issues in practice and develops and justifies an action plan.
- Respects confidentiality.
- Respects clients' occupational rights and choices at all times.
- Evaluates and justifies risk management strategies to ensure safety.

Engagement with the Profession

- Draws on knowledge from various sources (e.g. learned in school, previous fieldwork, peers) and critiques application in practice.
- Takes initiative in proposing evidence, considering scientific qualities (critical thinking) and applicability in the clinical context.
- Consistently fills knowledge gaps in practice.
- Contributes to building occupational therapist's role with the work of others such as assistants, volunteers and other team members.
- Integrates role modeling.
- Justifies to others (e.g. clients, family, staff) the benefits of activity-occupation-participation.



OT862: Community Development Placement Feedback Form

ORGANIZATION: _____

STUDENT: _____

SUPERVISOR: _____

Objective of the Form: To provide feedback to the community development fieldwork supervisors and the OT Program.

Instructions for Use: Students are requested to be as honest, direct, and specific as possible in completing this form. The form should be discussed with the placement supervisors. Please return one copy of this form to Queen's university at the end of your placement.

MIDTERM	FINAL
1. ORIENTATION to the organization was adequate in regard to: personnel, safety, resources, etc.	
Comments:	Comments:

MIDTERM	FINAL
2. ORGANIZATION of the learning experience provided:	
a. clear definition of student responsibilities	
Comments:	Comments:
b. discussion and personalization of placement objectives	
Comments:	Comments:
c. opportunity to acquire knowledge	
Comments:	Comments:

d. access to other staff, service recipients, or resources as needed	
Comments:	Comments:
e. an appropriate pace and schedule to meet learning objectives and complete project(s)	
Comments:	Comments:

MIDTERM

FINAL

3. Please comment on the COACHING/SUPERVISION in the following areas:	
a. Approachability & availability	
Comments:	Comments:
b. Provision of meaningful feedback	
Comments:	Comments:
c. Encouraged balance between support and independence	
Comments:	Comments:
d. Supervision style enhanced your learning	
Comments:	Comments:

4. STRENGTHS of the placement:

Midterm:

Final:

5. SUGGESTIONS FOR CHANGE:

Midterm:

Final:

Midterm Report Date: _____

Student Signature: _____

Supervisor Signature: _____

Final Report Date: _____

Student Signature: _____

Supervisor Signature: _____

Community Development Awards

Community Development Supervisor Award

Description: The Community Development Supervisor Award was established to recognize excellence in supervision and mentorship by a Community Development Supervisor who is affiliated with the Occupational Therapy Program in the School of Rehabilitation Therapy at Queen's University. This award is presented to one Community Development Supervisor each year. Nominations can be made by occupational therapy students and by colleagues.

Processes: A survey link/nomination form will be circulated annually in April and June to students and community development sites. Nominations will be due in early June/August. The coordinators of OT 861, OT862 and the SRT Associate Director (OT) will select the winner.

Awards: Award will be given to the chosen supervisor after the completion of all Community Development placements at the end of August. The winner will be presented with a certificate and an item of Queen's memorabilia (i.e. hat, scarf, t-shirt, or other items as available).

Community Development Student Award

Description: The Community Development Student Award was established to recognize excellence in community development by occupational therapy students in the School of Rehabilitation Therapy at Queen's University. This award is presented to up to 2 graduating occupational therapy students (potentially working in partnership on the same project) a year. Nominations can be made by Community Development Supervisors.

Processes: A nomination form will be included in the Community Development Supervisor's manual and also be circulated annually in May and August to community development sites. Nominations will be due at the end of August. The coordinators of OT861, OT862 and the SRT Associate Director (OT) will recommend the winner(s) based on performance in OT861 and OT862 to the Occupational Therapy Progress and Awards Committee.

Award Presentation: Award will be presented annually in November at the OT/PT graduation ceremony. The award will be a book prize.

Concerns Exist Form

Concerns Exist Form

Fieldwork Course: _____

Date: _____

Student _____

Preceptor _____

P

hone number _____

F

acility/Service _____

Concerns at this point in the placement:

Briefly describe strategies implemented so far:

Support requested from the university:

Please fax or email the completed form to:

(Clinical Placements – OT 846, OT 847 or OT 877)
Fax: 613-533-6776
Email: otfieldwork@queensu.ca

Fieldwork Award Nomination Form

Fieldwork Award Nomination Form

Occupational Therapy Program Awards for Fieldwork performance:

Established by the Physical Therapy Clinic at Queen's University, this award is presented annually to two graduating students for excellence in fieldwork performance. Nominations are accepted from any preceptors of a clinical fieldwork placement (OT 846, OT 847 and OT 877).

I nominate:

Student _____

Preceptor _____

Phone number _____

Facility/Service _____

Fieldwork Course: _____

Date: _____

Briefly describe student strengths that support your nomination.

Please email the completed form to:

(Clinical Placements – OT 846, OT 847 or OT 877)
 Email: otfieldwork@queensu.ca

MEMORANDUM OF UNDERSTANDING

This memorandum of understanding is made on DATE: _____ between:

STUDENT NAME _____ **EMAIL** _____

And School of Rehabilitation Therapy (SRT)
Louise D. Acton Building, 31 George St.
Kingston, ON K7L 3N6

During the course of clinical placements the student, from time to time, may be issued loan items from a clinical site that must be returned to the clinical site at the end of the clinical placement (e.g. personal alarm).

STUDENT agrees to:

- i) return any loan items to the clinical site at the end of the clinical placement;
- ii) take full responsibility to ensure that any item is returned as instructed by the clinical site (ie. to the appropriate person/department); and
- iii) notify the clinical site if any loan item becomes damaged or lost during the time of the clinical placement.

In the event that the site determines the lost or damaged item should be replaced at the expense of the student, the following steps will apply:

1. The clinical site will invoice the SRT for damaged or lost loan items;
2. The SRT will notify the student of the required payment, consistent with the invoice from the clinical site;
3. The student will pay the required amount (as notified in 2. above) through the School's online store.

Failure of the student to pay for any lost or broken equipment may result in sanctions. Those sanctions include:

- **Inability to progress to subsequent clinical placements; and/or**
- **Withholding of letter to respective regulatory body for licensure.**

It is the student's responsibility to ensure understanding of the cost of any loan item issued to the student by the clinical site.

This agreement will remain in place until the student completes their program of study at the SRT.

SIGNATURES:

STUDENT

Date

Dr. Stephanie Nixon, Vice-Dean (Health Sciences) or delegate
School of Rehabilitation Therapy, Queen's University

Date

STATEMENT OF CONFIDENTIALITY



In accordance with provincial and federal law, the Occupational Therapy Program in the School of Rehabilitation Therapy is committed to ensuring the confidentiality and privacy of personal information. As a student occupational therapist you will have access to personal information through your encounters with volunteers and mentors who share their lived experiences, clients/patients, students, preceptors, and/or other health care providers.

All personal information collected for educational purposes and fieldwork learning shall be treated as confidential material, to be protected for the privacy of the individual. Each student shall be expected to ensure respect for, and demonstrate integrity where all such confidential information is concerned. In educational settings, it is expected that any personal information which forms part of written or oral presentations will be anonymized to protect the identity of the individual(s). No student occupational therapist shall review or discuss client/patient information unless directly related to his/her fieldwork learning opportunity. There shall be no confidential information discussed outside of the fieldwork learning setting. Student occupational therapists will, under no circumstances, remove confidential information from the fieldwork setting and shall not be permitted access to information at a fieldwork site outside of the date(s) specified for the individual fieldwork learning experience.

It is the student occupational therapist's responsibility to read and understand the Canadian Association of Occupational Therapists (CAOT) *Code of Ethics* (2007) as well as the College of Occupational Therapists (COTO) *Essential Competencies of Practice* (2011). In accordance with these codes and standards, it is expected that each student occupational therapist will:

- "Ensure the confidentiality and privacy of personal information" (CAOT, 2007);
- Maintain "confidentiality and security in the sharing, transmission, storage and management of information" (COTO, p. 13);
- Comply "with client confidentiality and privacy practice standards and legal requirements" (COTO, p. 16);
- Adhere "to legislation, regulatory requirements and facility/employer guidelines regarding protection of privacy, security of information" (COTO, p. 23);

CAOT (2007). Canadian Association of Occupational Therapists Code of Ethics. CAOT Publications ACE, Revised January 2007. Available at <http://www.caot.ca/default.asp?pageid=35>.

COTO (2011). *Essential competencies of practice for occupational therapists in Canada* (3rd ed). Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO). May 2011. Available at http://www.coto.org/pdf/Essent_Comp_04.pdf.

- Establish and/or adhere “to provincial and facility policies and procedures related to the related to the management of information” (COTO, p.23); and
- Take “action to anticipate and minimize foreseeable risks to privacy and confidentiality of information” (COTO, p. 23).

For further information the student occupational therapist is directed to review the Freedom of Information and Protection Act (FIPPA) and Personal Information Protection and Electronic Documents Act (PIPEDA).

It is the responsibility of each student occupational therapist to uphold and respect the confidentiality of the personal information of all the volunteers/mentors, clients/patients, students, preceptors and/or other health care provider who you encounter during your fieldwork learning opportunities.

Any breach of confidentiality will be subject to academic sanctions at the discretion of the preceptor, course coordinator and/or fieldwork coordinator and may result in course failure and/or removal from the fieldwork learning opportunity.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS. I AGREE TO ACT IN ACCORDANCE WITH PROVINCIAL AND FEDERAL LAW, THE ‘CODE OF ETHICS’ (CAOT, 2007), ‘THE ESSENTIAL COMPETENCIES OF PRACTICE’ (COTO, 2011) AND ABIDE BY ANY CONFIDENTIALITY/PRIVACY POLICY AT A FIELDWORK SITE. I ACKNOWLEDGE THAT ENSURING CONFIDENTIALITY IS MY RESPONSIBILITY.

STUDENT
PRINTED NAME

WITNESS
PRINTED NAME

STUDENT
SIGNATURE

WITNESS
SIGNATURE

DATE

DATE

CAOT (2007). Canadian Association of Occupational Therapists Code of Ethics. CAOT Publications ACE, Revised January 2007. Available at <http://www.caot.ca/default.asp?pageid=35>.

COTO (2011). *Essential competencies of practice for occupational therapists in Canada* (3rd ed). Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO). May 2011. Available at http://www.coto.org/pdf/Essent_Comp_04.pdf.