



**AUT**

**Handbook for role  
emerging placements  
BHSc(OT)  
2021**

## INTRODUCTION

This handbook is designed to support students, onsite coordinators, clinical educators, lecturers and placement providers that offer role-emerging placements for final year BHSc (Occupational Therapy) students. It outlines general information and guidelines related to supporting students on role-emerging placements in professional practice. It will be used during role-emerging placements offered over the current academic year (2021) and MUST be read in conjunction with the appropriate documents and resources, including the appropriate Fieldwork Assessment Booklets.

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## **SECTION ONE: PLACEMENT CONTEXT**

### 1.1 WHAT IS A ROLE-EMERGING PLACEMENT?

In summary, role-emerging placements are defined as:

*“Clinical fieldwork placements that occur in settings without an established occupational therapy role or on-site occupational therapist, but in which there are clients that would benefit from occupational therapy services”. (Bossers et al., 1997b).*

Traditionally, occupational therapy students have been allocated to fieldwork placement settings in which occupational therapists have an established and/or existing role and supervise students to learn and practice the skills required for that role. Bossers and colleagues (1997a) described this type of placement as ‘role-established’.

Within the BHSc (OT) programme, not all settings that offer student placements are described as role-established. Fieldwork placements in settings that do not have either an established OT role or do not have an on-site occupational therapy supervisor are described as ‘role-emerging’ placements, consistent with the description of Bossers and her colleagues (1997a). Other terms used to describe these types of placements include ‘non-traditional’ and ‘innovative’ (Barker Dunbar, Simhoni, & Anderson, 2002).

In role-emerging placements, students are typically supervised during placement by an onsite supervisor/s in collaboration with a registered occupational therapist (i.e. clinical educator) who is not employed by the placement organisation. The frequency and duration of on-site supervision provided by the onsite supervisor and the clinical educator is determined by various factors and, where possible, in collaboration with the placement provider and the student(s) allocated to that provider.

### 1.2 HISTORICAL CONTEXT FOR ROLE-EMERGING PLACEMENTS AND CONGRUENCE WITH THE PROGRAMME PHILOSOPHY

Fieldwork education is an essential component of any occupational therapy professional education programme. The aim is the integration of theory to practice of the three learning domains - knowledge, skills, and attitudes - as well as the development of clinical reasoning skills and professional identity.

Despite recognition of the essential need for fieldwork opportunities to develop professional competence, it has become increasingly difficult to secure student fieldwork placements (Bossers et al., 1997a; Huddleston, 1999). This need for quality learning experiences coupled with changes in the philosophy of our profession and a shift from medical to community-based practice (Cooper & Raine, 2009) has prompted exploration and development of new learning settings and experiences for students.

Role-emerging placements offer learning opportunities for students congruent with the BHSc(OT) programme philosophy, related particularly to action learning and self-directed learning. Our beliefs about action learning and self-directed learning provide the pedagogical framework for the learning process. To enter practice, occupational therapists require a specialized knowledge of occupational therapy including an understanding of the meaning and value of occupation. They also require knowledge of the humanities and the basic and applied sciences, including the biomedical sciences, behavioural sciences, and social sciences. Occupational therapists require a set of generic skills and behaviours (e.g., teamwork, communication, information management, critical appraisal, critical

thinking, clinical reasoning, and ethical decision-making) in addition to specific occupational therapy skills. Role-emerging placements require an emphasis on self-directed learning that is compatible with action and student-centred pedagogies (Cooper & Raine, 2009; Jung, Solomon & Cole, 2005).

The central purpose of the BHSc (OT) programme is to prepare occupational therapists who possess the requisite knowledge, skills and professional behaviours to practice in the emerging realities of the current health, education and social service systems. Furthermore, they need to engage in a broader societal context of rapid and constant change, within local, national and international communities. A role-emerging placement offers the context for this learning. Students will achieve an understanding of the influence of family, society, culture and environment as they explore the concepts of occupation and health across the lifespan and within the context of client-centred practice.

Graduates exit the BHSc (OT) programme with knowledge and understanding; inquiry, research and creativity skills and application; ethical and professional dispositions; communication; and personal and intellectual autonomy evidenced through the values of scholarship, professional and societal contribution, and lifelong learning.

## 1.3 EVIDENCE TO SUPPORT ROLE-EMERGING PLACEMENTS

### 1.3.1 Benefits of Role Emerging Placements

#### For students:

- Provides opportunities for students to identify the OT role rather than having it imposed; thus it facilitates an occupational focus and is empowering (Cooper & Raine, 2009).
- Provides opportunity for development of clinical reasoning skills (Thew, Hargreaves, & Cronin-Davis, 2008).
- “Provides different opportunities to develop confidence in core skills such as problem-solving and the therapeutic use of activity from more traditional settings” (Cooper & Raine, 2009, p. 417)
- Provides increased student autonomy, professional growth, and creativity (Bossers et al., 1997a)
- Provide experiences in roles that are different from traditional hierarchical settings (Bossers et al., 1997a)
- Provides increased learning about personal communication and reflection skills (Thew et al., 2008)

#### For the profession:

- Advancement of the profession into new practice areas (Cooper & Raine, 2009)
- Increased awareness of OT role and potential to others (Bossers et al., 1997a)

#### For the placement provider:

- Students become team members and as such, provide short term occupational therapy services or denote benefits of occupational therapy; students may leave project work that continues to benefit the organization (Bossers et al., 1997b)
- Students and educators can offer additional skills and contributions including service provision, evaluation methods and education (Cooper & Raine, 2009; Wilkins & Jung, 2001)
- Increased partnership with universities and increased opportunities to enhance evidence-based practice (Cooper & Raine, 2009; Jung, Solomon & Cole, 2005)
- Staff have an increased understanding of the occupational therapy role in the setting and there is a potential to create future employment opportunities (Jung, Solomon & Cole, 2005)

### 1.3.2 Challenges of Role-Emerging Placements

#### For students:

- Less OT-specific supervision time (Jung, Solomon, Cole, 2005; Thew et al., 2008); can feel isolated or overwhelmed by role ambiguity and need to define OT role (Cooper & Raine, 2009)
- Concerns about not being able to learn what is perceived to be "traditional" skills in the profession (Jung, Solomon & Cole, 2005).
- Potential for students to become an additional staff member; assertiveness needed to ensure a focus on occupation (Cooper & Raine, 2009) and student needs
- Concerns about their understanding of the professional role in the role-emerging placement setting (Bilics, LaMothe & Murphy, 2002)

#### For the profession:

- Can be demanding on professional practice time and resources (Cooper & Raine, 2009) including tasks such as arranging contracts/agreements with the site (Jung, Solomon & Cole, 2005)
- Access to registered occupational therapists who could provide off-site supervision and support to students based on their expertise and comfort with this role (Jung, Solomon & Cole, 2005)

## 1.4 STRATEGIES FOR SUCCESSFUL ROLE EMERGING PLACEMENTS

The evidence suggests a number of **key strategies** that students can utilise for success in role-emerging placements, which might include:

- Reviewing any prior reports/projects from past role-emerging placements at that facility
- Focusing initially on rapport building and establishing relationships with clients and other staff members. Participate in activities and events available at the facility even if it is just coffee or lunch breaks. Take initiative to learn more about others.
- Consider how information is shared in the practice setting and what strategies can be used to enhance communication with others.
- Showing sensitivity to clients and their particular needs.

#### **In addition, students need to:**

- Be mindful that it can take time to fit into an established culture and environment (Letts, Davis, Richardson, Edwards, Baptiste, & Law, 2006).
- In most instances, students will be paired on a role-emerging placement to enable peer support and problem-solving particularly when the clinical educator is not readily available.

<b>1.5 KEYS TO SUCCESS IN ROLE EMERGING PLACEMENTS</b>	
<i>Potential Challenge</i>	<i>Strategies for Success</i>
Potential ambiguity/uncertainty of occupational therapy role since the placement setting does not have an established OT role or programme	<p>Seek information, research experiences and the needs of the type of clients to be encountered prior to the start of placement</p> <p>Attempt to discuss the placement with students who have previously had a role-emerging placement, particularly in that area</p> <p>Prioritize time spent with on-site supervisor to allow discussion of role</p> <p>Use content learned from course work to understand link to occupation and current clients</p> <p>Recognise and use theoretical frameworks to guide therapeutic process</p> <p>Recognise that feelings of ambiguity will exist and that is “normal”; remember that you are not expected to know all of the answers - placement is a learning opportunity. Embrace it!</p> <p>Use reflective journaling to document and explore issues/challenges <b>(Required; See Page 16)</b></p> <p>Determine and use alternate resource people who may also be of help</p> <p>Onsite staff and Clinical Educator can promote learning by asking students to clearly articulate theories and rationale</p>
Reduced physical access to the occupational therapy clinical educator	<p>Use and appreciate other resource people (e.g. other health care providers, faculty, family)</p> <p>Negotiate a clear communication system with onsite supervisor and clinical educator</p> <p>Use time when not with onsite supervisor/clinical educator to prioritize learning needs and potential questions you would like to ask</p> <p>Consider reviewing weekly plans at the start of the week with the onsite supervisor and then “checking in” with the clinical educator at the end of the week regarding what was completed, challenges in doing so and then activities to carry over into next week</p> <p>Clearly name identify your learning needs so that the clinical educator can recommend appropriate resources or strategies</p> <p>Use your strengths (i.e. accessing literature and research to address questions)</p> <p>Identify and utilise other occupational therapists or OT students as resources if needed</p> <p>Consider and use other health care providers or the on-site supervisor</p> <p>Provide thoughtful and appropriate feedback to help ensure your learning needs are met</p>
Accountability for own actions	<p>Use a journal as a tool for reflection <b>(Required; See Page 16)</b></p> <p>Develop and document an organized schedule of activities</p> <p>View yourself as an extension of the University and the clinical educator and represent both yourself and our professionalism and credibility</p> <p>Recognize and exploit the opportunity to leave a lasting impact as an ambassador for the profession; feel empowered by the opportunity to develop an occupational focus and perspective</p>

<p>Uncertainty around learning experiences</p>	<p>Consult with graduates/other students who have previously had role-emerging placements as resources</p> <p>View fieldwork learning as a continuum, that each setting provides unique opportunities to learn View of self as change agent; recognize and embrace the opportunity to leave a lasting impact as an ambassador for the profession</p> <p>Seek information; research the practice area, setting and/or experiences and needs of the type of clients to be encountered prior to the start of placement Identify and use personal supports who will help you to achieve and maintain confidence in times of uncertainty</p>
<p>Lack of clearly defined roles can create challenges establishing boundaries</p>	<p>Ensure student/s, clinical educator, and on-site supervisor clarify roles and expectations in the student orientation</p> <p>Be assertive in identifying your own learning needs and negotiating limits if needed (e.g. If you are being asked to do too much assisting other staff, help during busy times but be sure to also address your own learning)</p> <p>Recognize learning and rapport building opportunities that can occur</p> <p>Seek advice and support from one another, and others, about establishing boundaries</p>



## SECTION TWO: ROLES AND RESPONSIBILITIES

For a successful fieldwork experience, a mutual understanding of responsibilities is necessary.

### 1. AUT RESPONSIBILITIES

#### 1.1. Before placement

1. **Immunisation screening:** Students have been screened for the following immunisations prior to starting placement: Hepatitis B, Varicella, MMR and Tuberculosis.
2. **Supervisors Education:** Education for supervisors/providers will be available throughout the year with support and/or resources from the AUT Practicum Leader, to assist the development of knowledge and skills in relation to student supervision and fieldwork education.
3. **Students' Fitness to Practise:** Through an internal AUT screening process the AUT Practicum Leader identifies students who have potential support needs issues they may face while on placement. Specific support needs are discussed, and students will be encouraged to discuss these with their Supervisor prior to beginning their placement.
4. **Placement planning: Forms and processes:**

Individual placement providers	
<b>Offers of placement</b>	Individual placement providers can contact the AUT Fieldwork Coordinator(s) directly.
<b>Confirmation of placements</b>	Coordinated by Fieldwork Administrator
<b>Site Profile information:</b>	Students will contact the Fieldwork Supervisors directly once the placements have been finalised
<b>Information pack</b>	Fieldwork Supervisors are provided with an information pack, approximately 2-3 weeks before the placement starts. This includes: Student Assessment Booklet [for Student & Supervisor]. Schedule of Mid-Placement Forums (Year 3 students only) Letter advising student name/s prior to commencement of placement.

#### 1.2 During placement

##### *Specific areas of support:*

1. **Mid-placement forum and the mid-placement telephone conference:** Will be offered to Third Year students on each of the year 3 practicums. Forum details will be sent out with the information pack. We recommend students attend either the forum or the conference, as sharing each other's experiences and obtaining constructive feedback and support can often allay any questions and concerns.
2. **Placement problem-solving process:** If there are any concerns regarding the student's progress on placement, please refer to the flow-charts and the supervisor checklist.

(**Appendix 14, 15 & 16**). A collaborative and appropriate plan to support the student and Supervisor will ensure a constructive & positive outcome is reached.

3. **AUT Support:** All students have access to AUT Student support services, e.g. Student advisors, Student Health and Counselling Services. Students are encouraged to contact them if they require their assistance whilst on placement. They can be contacted on (09) 9219998. Alternatively, students can contact the AUT student helpdesk on (09) 9219953.

### 1.3. After placement

1. **Debrief:** A debrief lecture and tutorials are scheduled for students after placement, in order to provide opportunity to reflect on and start integrating learning whilst on placement.
2. **Individual follow-up:** Individual follow-up after placement, for support or debriefing, can be initiated by a student, CCP Leader, AUT Practicum Leader or Supervisor/Clinical Educator.

## 2. SUPERVISOR/CLINICAL EDUCATOR RESPONSIBILITIES

### 2.1. Before placement

For the successful outcome of a fieldwork placement it is important that the clinical educator, onsite supervisor, and the placement provider are well prepared for supporting a student. Several resources are available to the clinical educators and supervisors for this purpose.

1. Access Supervisors education resources – for placement providers with an individual contract, contact the AUT Practicum Leader for any further information or discussion.
2. Access **Blackboard** for further resources (see page 1, Fieldwork Manual).
3. Familiarise yourself with the fieldwork assessment tool to ensure accurate interpretation.
4. Identify appropriate learning opportunities for the student(s), targeted to their level of knowledge and experience at the start of the placement.
5. All Supervisors: Complete the online 'Learning Style Questionnaire' (on **Blackboard/AUTonline**) and analyse the data according to the guidelines (**Appendix 4**). Be prepared to discuss this with the student at the beginning of each fieldwork placement and identify the best ways to work together.

### 2.2. During placement

The onsite supervisor and the clinical educator will need to negotiate **three** major areas of responsibility while the student is on placement:

- Day-to-day supervision;
- Managing the placement; and
- Administrative functions

#### **Supervisory responsibilities**

These include, but are not limited to the following:

1. **Learning style:** Discuss your learning style and collaborate with the student(s) to achieve clear expectations and agree on a supervision structure during the placement.
2. **Orientation:** Typically, the onsite supervisor/s will be responsible for introducing student(s) to appropriate personnel within the work setting and provide a full orientation to the service area (**see Fieldwork Manual - Appendix 5 for a suggested list of topics to be covered**).
3. **Placement expectations:** Both the onsite supervisor/s and the clinical educator will need to ensure placement expectations are clear, appropriate to the student's level of knowledge and experience in the context of the service, and discussed in detail, e.g. ensure the student knows the expected standards of personal presentation and behaviour within the setting. It may be useful to have these written down (e.g. in a student information folder).
4. **Supervision and feedback:** Formal supervision and feedback are typically the responsibility of the clinical educator, and will likely include meeting with the student/s regularly to review

performance and to provide guidance – this may take the form of informal feedback and must include a weekly formal supervision time. This process could include:

- Monitoring the student's professional reasoning.
- Observe the student performing (aspects of) the occupational therapy process (if required).
- Giving constructive feedback as soon as possible following observations.
- Audit student's record keeping and documentation as per setting requirements
- Encourage student's self-assessment and reflection.
- Encourage the student to reflect on their own development and learning experiences, by monitoring and discussing at least one of the student's written reflections each week.
- Ensure that the student is able to identify appropriate learning objectives each week and assist them to set appropriate action plans to meet his/her learning objectives for the placement. Discuss and guide this process and ensure they are recorded on the Student Learning Objectives form (**Appendix 9**).
- Monitor and adjust the student's activities and client caseload appropriate to their stage of learning, skills and knowledge.
- Facilitate practical tutorials performed by the students. Students will be encouraged to look up and research information and share the information with their peers. Tutorials may be also be performed by the supervisor where time and department policy allows, occupational therapy in-service presentations can be used as on-going learning sessions for students.
- Arrange for the students to attend relevant clinics and surgery as relevant to the placement learning experience
- Complete the mid-placement formative assessment around the middle of the placement (not applicable for Practicum 1) and document specific areas for improvement.
- The student should be informed if they are not meeting the learning outcomes at this stage and be given documented, clear and specific feedback as to how they can develop their skills and knowledge following the mid-placement assessment.
- Complete the final assessment near the end of the placement – see assessment process guidelines (**Appendices 18 - 22**).

### **Administrative responsibilities**

These include, but are not limited to the following:

1. **Placement hours:** Ensure that your student has recorded any absences on the students hours form provided in the student assessment booklet, and **sign-off** at the end of the placement. Students are expected to complete 40 placement hours per week. **This includes 4 hours of self-directed study time.** Placement start and finish times to be discussed and/or negotiated with the student.
2. **Absence from placement:** Absence protocols outlined in this manual (see p. 15) will need to be followed when a student is absent from placement.
3. **Assessment booklet:** Assess the student's capabilities in relation to the marking grid, using the student assessment booklet provided.
4. **Concerns:** If a Supervisor has concerns regarding a student's performance, this needs to be discussed with the student as soon as possible, before contacting the CCP Leader or AUT Fieldwork Coordinator (as applicable). If you are not sure how to approach the situation with the student, please follow the contact guidelines on p. 5. (**See also flow chart on 'Supervision Challenges Guidelines for Supervisors', Appendix 14; Supervisor Checklist for responding to supervision challenges, Appendix 16**)
5. **Assessment booklet:** Please return the student assessment booklet to the Fieldwork Administrator immediately following completion of placement. Final grades must be generated by the AUT CCP Coordinator before the AUT Exam Board meeting and timeframes are sometimes tight.
6. Work with the CCP Leader and/or AUT Fieldwork Coordinators (as applicable) to develop and improve systems related to fieldwork education.

*Adapted from the Commission on Education of the American Occupational Therapy Association (1988)*

### 3. STUDENTS' RESPONSIBILITIES

#### 3.1 Before placement

1. **Driver's License:** in order to ensure that all students can be placed in a variety of learning opportunities, students are **strongly advised** to have a FULL driver's license by the start of Practicum 2, preferably at the start of Semester 1 in Year 3 when the allocation process starts.
2. **Employment during placement:** It is recommended that students plan to be free from work commitments during placement if at all possible. Placement is a challenging time and any extra demands on students can have a significantly negative impact.
3. **Immunisations:** Students must take responsibility to ensure that all immunisation screening for HepB, Varicella, MMR and Tuberculosis has been completed according to the procedures at AUT, by the end of semester 1 of the programme. Attend MRSA screening as instructed. All immunisation information is included in the information pack at the start of the programme. Contact [immunisations@aut.ac.nz](mailto:immunisations@aut.ac.nz) for any questions.
4. **Students' Fitness to Practise:** all students will participate in an internal AUT screening process in order to ensure that any known support needs are identified and discussed. It is the student's responsibility to declare any issues that may impact on their performance on placement. Following discussion with the Fieldwork staff a meeting with the CCPL may be organised, with the student's consent, to discuss their specific support needs with their CCPL prior to beginning of their placement, so that appropriate supports can be implemented by the Supervisor.
5. **Introductions:**
  - (a) Students will be requested to send a completed copy of the "Student Information for Supervisor Form" (see **Appendix 3**) prior to allocations within the CCPM partner organisations, in order to try and ensure the best possible student / placement fit. Students will be informed regarding expected submission date for this.
  - (b) After Supervisor contact details have been received, students send a letter of introduction, a short CV and the completed "Student Information for Supervisor Form" (**Appendix 3**) to the Supervisor **three weeks** before the start of the placement.
  - (c) **Contact the Supervisor by telephone approx. two weeks before the start of placement, unless otherwise instructed, to discuss reporting time/place on first day, any requirements to drive vehicles, parking/accommodation information, pre-placement readings, the client group and primary conditions, practice and assessments used, and any specific learning opportunities.**
6. **Prepare for placement:**
  - (a) Familiarise with any recommended reading identified by the supervisor and formulate initial learning objectives.
  - (b) Complete learning styles questionnaire (**see FM; Appendix 4**) and be prepared to discuss the results with the Supervisor early in the placement.
  - (c) Complete the Checklist prior to placement (**FM; Appendix 2B**).
7. **Contact details:** Ensure that contact details are up to date on Arion. Provide contact details for the duration of placement on the Placement information form at the start of the placement allocation process.
8. **Confidentiality:** All students will sign a confidentiality of information form that covers them for the duration of their enrolment and they will retain a copy of this for their own records. Please feel free to print another copy if required. (**See FM; Appendix 6**). Students will also sign additional consent forms, if required by the placement service.
9. Ensure that the standard of dress on placement complies with AUT and placement requirements.

## **Standard of dress**

**Professional standard:** The occupational therapy student uniform must be worn during fieldwork placement where this is indicated by the placement provider. AUT student name badges must be worn at all times, unless otherwise indicated by your Supervisor (see information on **Blackboard** for details).

If a uniform is not worn in the setting, a smart and professional standard of dress appropriate to the fieldwork area is required. Students should avoid wearing items of jewellery that may pose a danger to the client or themselves (e.g. dangly earrings or rings), or clothes that one can “see through, up or down”.

### **3.2. During placement**

Students are expected to work with Supervisor and/or CCP Leader to ensure compliance with fieldwork placement requirements.

The responsibilities of the student include:

1. **Working relationship:** Develop an effective working relationship with their Supervisor and other staff within the service.
2. **Hours of work while on placement:** Students are expected to complete 40 placement hours per week. **This includes 4 hours of self-directed study time.** Placement hours to be negotiated with the Supervisor.
3. **Orientation:** Actively become orientated to the placement setting, by identifying routines, general protocols and discussing expectations (the Supervisor’s, the student’s and the organisations).
4. **Learning style:** Discuss the results of the completed learning styles questionnaire with your Supervisor at the beginning of the placement.
5. **Supervision:** Clarify expectations, structure, format, time and venue of supervision with CPP Supervisor. Students are expected to:
  - complete and review weekly learning objectives on the Student Learning Agreement form, print and take to supervision for discussion / feedback (**see Appendix 9**).
  - contribute to writing a supervision contract (see **Appendix 8**).
  - complete a practicum supervision log (**see Appendix 12**).
  - share and discuss at **least one, preferably two, reflections** on your experience and what you have learnt each week (**see Appendix 13**).
6. **Feedback:** Seek specific and concrete feedback, both confirming and corrective from the Supervisor throughout the placement. Discuss when, where and how feedback is preferred.
7. **Linking theory with practice:** Practise what has been learned in theory, and be open to learning new approaches; use every situation as a learning opportunity.
8. **Site policies:** Comply with all policies and procedures of the fieldwork site, including prompt and appropriate notification of absences.
9. **Time management:** complete all duties and tasks given by the supervisor within the time-frame specified. If problems arise with this, they need to be brought up in supervision.
10. **Challenges on placement:** Challenges on placement may be first identified and experienced by a student when receiving feedback that the expected level of competency / performance is not being met, often during supervision or at the mid-placement assessment. Students are encouraged to follow the steps in the flow chart in **Appendix 15** in order to assist with identifying strategies to improve performance and ways to resolve the concerns / difficulties in a timely manner.

#### **Student feedback on placement experience:**

- Students will have opportunity to provide feedback on placement issues to AUT via the Student Paper Experience Questionnaire (SPEQ), or when asked for informal feedback during a placement de-brief session.
- Placement provider organisations may request feedback from students about their placement experience as well, for placement development purposes. The CCPL of the organisation will inform students of details.

## **Student projects:**

Students may be asked by the Supervisor to complete a project whilst on placement. The size of the project should be manageable within the duration of the placement.

**The student benefits by:** gaining fieldwork experience beyond direct client contact, thus broadening their understanding of the work demands of an occupational therapist, contributing something tangible to the workplace and having an opportunity to work independently of their Supervisor.

### **Some examples of student projects:**

- Gathering appropriate literature for a project that the service wants to develop
- Providing an education session on a new theory /model of practice for the staff
- Making a resource to be used in the service
- Developing an information leaflet for client services
- Gathering information about services available to clients in the community

## **Professional behaviour:**

All students must maintain a professional standard of behaviour in accordance with the New Zealand Occupational Therapy Board Code of Ethics (Refer to [www.otboard.org.nz](http://www.otboard.org.nz) & 'Publications' for details).

Unacceptable behaviour or misconduct in relation to AUT regulations or normal placement provider disciplinary protocols may jeopardise the student's eligibility to complete the programme. Due process needs to be followed by the student, the Supervisor and/or CCP Coordinators (see flow chart in

### **Appendices 14 and 15)**

Students who have concerns are encouraged to discuss these with the Supervisor in the first instance and contact the CCPL as second step. Students are also welcome to contact the AUT CCP Coordinator if they feel this is needed, without reproach.

Any student involved in an error or incident (e.g. client fall), must complete the standard placement provider incident documentation as well as the AUT "Clinical Incident Involving a Student Form" (see **Appendix 7**). Prior to enrolling on the BHSc(OT) programme, all students will have undergone a police check in line with HPCA Act requirements.

## **3.3 At the end of Placement**

Participate in placement de-briefs as indicated in the topic outline in the relevant paper booklet.

### SECTION THREE: WORKING INDEPENDENTLY ON PLACEMENT

Over the course of the BHSc(OT) programme, students develop skills such as problem-solving and critical thinking, self-direction and autonomy. These, together with increasing content and procedural knowledge, prepare students for competent entry-level professional practice. Clinical education, through placements in a variety of settings, offers students experiential learning opportunities in which academic learning can be integrated. At each progressive level of placement experience, the expectations for the student increase.

In the first placement experience in Year One, students shadow an occupational therapist and may take on direct and indirect activities with clients that are deemed to be appropriate for the specific setting and the student. Throughout all placements however, even those in which there is a greater level of supervision required, students can and should be involved in multiple independent activities which will enhance learning and provide valuable contributions to the setting and clinicians with whom they are placed. These important supporting activities can be planned and conducted by the students themselves, as negotiated and agreed upon with the supervisor. Such activities can be considered to be part of the “normal” placement hours in any supervision model. Having dedicated time to learn is essential in supporting the development of knowledge and skills necessary for the provision of service to clients.

**The following are examples of independent activities** students may engage in at times where direct activities with clients are not occurring:

- Planning and preparation for upcoming days or weeks in placement
- Accessing literature/information about clients, diagnoses, assessment and treatment
- Group or individual intervention planning
- Preparing/reviewing/synthesizing client information into reports
- Practice of documentation skills
- Preparation resources to support/advance the work of the organisation
- Preparation of educational materials to support/advance intervention and client recommendations
- Summaries and critical appraisals of evidence and literature related to identified practice area topics
- In-service preparation for delivery to staff (including, but not limited to client case studies, standardized assessment tools, intervention strategies)
- Marketing of innovations through development or revision of brochures and visual materials
- Site visits to related organisations, clinics, clinicians
- Collaboration with support personnel to master handling skills; wheelchair, seating and mobility skills; transfer skills; range of motion and strength measurement, etc.
- Collaborating with others in the same organisation
- Practicing clinical interviewing skills
- Contact and resource lists relevant to particular client populations
- Special projects (Organisations are encouraged to develop a list of research questions and project outlines)

In identifying other activities that may be viable for students to undertake, activities should:

- Provide an opportunity for students to develop their competence in occupational therapy practice;
- Increase the quality and efficiency of client assessment, intervention, service; and
- Improve communication or the translation of knowledge between clinician and client, intra- and inter-professionally, and from a systems perspective

### 3.1 REFLECTIVE JOURNALING

Journaling is **recommended** for all placements and is **required** for role-emerging placements because:

- It is a strategy to encourage student self-reflection and clinical reasoning
- It facilitates self-understanding, growth and development
- It is used as a teaching/evaluation tool in clinical education
- It is used as a trigger for subsequent discussions between preceptor and student

#### **Journal expectations on a role-emerging placement:**

- 1 A minimum of two entries per week are required
- 2 At least 2 double spaced typed pages as a journal entry. Double spacing allows the clinical education to add comments in an interactive process
- 3 The journal is used as scaffold through which the student participates in individual supervision with the clinical educator

**Students must make time in supervision to discuss the journal as** interactive journaling is very helpful but needs to be done in a timely way (should be done immediately to assist student in resolving issues or dilemmas)

#### **What content should be journaled?**

- Thoughts, feelings, concerns, or issues arising from the learning experience
- Can be done at any time but best when student is thinking/working through a placement related issue
- More than a log (e.g. record what was done at 9 am, 10 am etc.) The submission may be a hybrid of log and reflections however it is important that a journal is **not** exclusively a log
- It may be best to be flexible with the type of content however approach should be thoughtful, rather than contrived

#### **Why are you being asked to keep a journal?**

- To enhance student learning and evaluation
- To capture what students do when conducting tasks independently (i.e. without observation by clinical educator)

#### **\*\*\* Please ensure confidentiality by:**

- Identifying who will see the journal;
- Identifying where the journal will be kept and whether (and when) the journal will be destroyed;
- Not using information that identifies clients or the provider/organisation in your journal.



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### Unique practice settings

Student and clinician perspectives on various placement settings are discussed. Settings include a homeless shelter, a private practice, a poultry plant, and a community agency. Themes identified are personal and professional growth, role elaboration, and opportunity for learning in the context of health care reform.

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