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# Fieldwork Educator Preparedness: A Study Examining the Effect of an Online Learning Module on the Perceived Preparedness Levels of Fieldwork Educators

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**Fieldwork Educator Preparedness: A Study Examining the Effect of an Online Learning  
Module on the Perceived Preparedness Levels of Fieldwork Educators**

Presented in Partial Fulfillment of the  
Requirements for the Degree of  
Doctor of Occupational Therapy

Eastern Kentucky University  
College of Health Sciences

Department of Occupational Science and Occupational Therapy

Breanna Chycinski

2020

**EASTERN KENTUCKY UNIVERSITY**

**COLLEGE OF HEALTH SCIENCES**

**DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**

This project, written by Breanna Chycinski under direction of Dr. Casey Humphrey, Faculty Mentor, and approved by members of the project committee, has been presented and accepted in partial fulfillment of requirements for the degree of

**DOCTOR OF OCCUPATIONAL THERAPY**

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Certification

We hereby certify that this Capstone project, submitted by Breanna Chycinski conforms to acceptable standards and is fully adequate in scope and quality to fulfill the project requirement for the Doctor of Occupational Therapy degree.

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## Executive Summary

**Background:** Fieldwork education is the bridge between the academic program and authentic occupational therapy (OT) practice. The need for quality fieldwork sites and qualified fieldwork educators (FWEd) continues to increase as the number of students enrolled in OT programs across the world increases. Literature exists with regards to the characteristics of an effective FWEd, however little is understood about how to facilitate the transition from a novice FWEd to a competent FWEd.

**Purpose:** The purpose of this research project was to compare how the implementation of a learning module, titled *The Fieldwork Educator Competency Module* altered the perceived level of preparedness of OT practitioners related to their role as a FWEd for Level II OT students. This study aimed to answer the following central research question: What is the variation between pre-post survey results concerning the perceived level of preparedness of OT practitioners related to their role as a FWEd for Level II OT students following completion of a learning module? The researcher hypothesized that OT practitioners would report higher levels of perceived preparedness in their role as a FWEd for Level II OT students following completion of a learning module.

**Theoretical Framework.** The Ecology of Human Performance (EHP) provided the OT framework for the proposed research study and the development of the learning module was based on adult learning theory as well as cognitive constructivism.

**Methods.** This study used a quantitative, pre-experimental, one group pretest-posttest research design. Data was analyzed with the use of SPSS Statistics software. Descriptive statistics consisted of a description of the sample population. By running the McNemar's Test, the researcher was able to compare the pre and post-survey responses to identify changes in levels of preparedness. All components of the research took place in an online, virtual setting. The participants were OT practitioners working in a variety of clinical settings, who were eligible to take on the role as a Level II FWEd. They were identified using convenience and snowball sampling methods. Potential participants were sent an email containing a link to Rise 360, giving them access to the pre-survey, learning module content, and post-survey.

**Results.** A completion rate of 80% was calculated for the pre-survey and 96.7% for the post-survey. The majority of the participants were from the Midwest region of the United States (68.75%). Results indicate a positive change for at least one participant for each question of the survey. The largest number of respondents (62.5%) reported a change in their level of preparedness to self-identify and implement a FWEd professional development plan. Furthermore, 56.25% of respondents identified a change in preparedness with regards to using current supervision models and theories to facilitate student performance and professional behavior, and 50% reported a positive change related to feeling prepared to designing and implementing a fieldwork program in accordance to accreditation standards as well as feeling prepared to identify the legal and healthcare policies that influence fieldwork and supervision guidelines.

**Conclusions:** Outcomes show that the use of an online learning module, titled *The Fieldwork Educator Competency Module* had a positive impact on the overall level of preparedness of those that participated. This study has implications for the occupational therapy profession specifically regarding best practices that should be used to prepare OT practitioners for the role of FWEd, as well as decreasing the shortage of qualified and prepared OTs who are willing to be FWEds.

## **Acknowledgements**

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**EASTERN KENTUCKY UNIVERSITY**

**COLLEGE OF HEALTH SCIENCES**

**DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**


**CERTIFICATION OF AUTHORSHIP**

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*Certification of Authorship: I hereby certify that I am the author of this document and that any assistance I received in its preparation is fully acknowledged and disclosed in the document. I have also cited all sources from which I obtained data, ideas, or words that are copied directly or paraphrased in the document. Sources are properly credited according to accepted standards for professional publications. I also certify that this paper was prepared by me for this purpose.*

Student's Signature: 

Date of Submission: 12/1/2020



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## **Section 1: Nature of Project and Problem Identification**

According to the American Occupational Therapy Association (AOTA) (2009b), “fieldwork education is the essential bridge between academic education and authentic occupational therapy practice” (p. 822). The need for quality fieldwork sites and qualified fieldwork educators (FWEd) continues to increase as the number of students enrolled in occupational therapy (OT) programs across the world increases. There are approximately 906 occupational therapy programs approved by the World Federation of Occupational Therapists (WFOT) and another 350 non-WFOT approved programs, all of which seek successful fieldwork opportunities for their enrolled students (WFOT, 2018). As a result, academic fieldwork coordinators (AFWC) face a shortage of clinicians who are both qualified to be a FWEd and are prepared for this role (Evenson et al., 2015; Hunt & Kennedy-Jones, 2010; Kirke et al., 2007). Dickerson (2006) outlines role competencies used by academic institutions in the identification of competent FWEs, which include knowledge, critical reasoning, interpersonal skills, performance skills, and ethical reasoning. While literature regarding qualities of an effective FWEd exists (Dickerson, 2006; Hanson, 2011; Hunt & Kennedy-Jones, 2010; Kirke, et al., 2007; Roberts et al., 2015; Stutz-Tanenbaum & Hooper, 2009), little is understood about how to facilitate the transition from a novice FWEd to a competent FWEd. In order to ensure continuation of high-quality fieldwork education in the field of occupational therapy, identification of best practices for establishing FWEd preparedness is critical. Therefore, the following Capstone research project has been developed to address this need.

### **Problem Statement**

Academic programs work diligently to ensure establishment of high-quality fieldwork sites, however practitioners often feel that they are not adequately prepared to serve as FWEs

(Chapman, 2016). Even though they may exhibit supervisory skills, they lack necessary instructional design skills needed to be the most effective educators. AOTA (2018a) provides a list of criteria that constitutes an exemplar FWEd, however little research exists exploring the qualifications and resources needed and available for FWEds to become prepared for this role (Roberts et al., 2014). Further research must investigate current levels of FWEd preparedness along with methods used to improve level of preparedness.

### **Purpose Statement**

The purpose of this quantitative pre-post survey was to compare how the implementation of a learning module, titled *The Fieldwork Educator Competency Module* altered the perceived level of preparedness of occupational therapy practitioners related to their role as a FWEd for Level II occupational therapy students. The learning module is defined as an online training module that was provided to FWEds and content included the purpose and goals of Level II Fieldwork, fieldwork guidelines, how to create a successful fieldwork program, how to facilitate student progression towards entry-level practice, modifying supervision styles to match the needs of the student, and effective tools for providing feedback as well as evaluating the Level II Fieldwork student. FWEds are individuals who supervise occupational therapy students. According to the Accreditation Council for Occupational Therapy [ACOTE] (2018), FWEds for Level II occupational therapy students must be currently licensed or otherwise regulated and have a minimum of one-year, full-time practice experience following initial certification.

### **Research Question and Hypothesis**

This study aimed to answer the following central research question: What is the variation between pre-post survey results concerning the perceived level of preparedness of occupational

therapy practitioners related to their role as a FWEd for Level II occupational therapy students following completion of a learning module?

The researcher hypothesized that occupational therapy practitioners would report higher levels of perceived preparedness in their role as a FWEd for Level II occupational therapy students following completion of a learning module.

### **Theoretical Frameworks**

The Ecology of Human Performance (EHP) provided the occupational therapy framework for the proposed research study (Dunn et al., 1994). This theory is applicable to a variety of settings to meet needs across the life span (Cole & Turfano). There are four main constructs that influence the underlying assumptions of this model, which include the person (sensorimotor, cognitive, psychosocial domains), tasks (the building blocks of occupations and roles), context (temporal, physical, social, and cultural), and human performance (based on the interaction between the person, the context they are in, and tasks engaged in) (Cole & Turfano, 2009; Dunn et al., 1994). Under this model, one potential therapeutic intervention approach includes remediation, in which the occupational therapist assesses a client's abilities and barriers to performance. The therapist then develops interventions to improve the client's abilities (Dunn et al. 1994). EHP is applicable to this study since the person (FWEd), the task (role as a FWEd), and context (supports provided to the FWEd by academic programs and barriers such productivity demands) are all factors that influence performance (competency and preparedness in role as a FWEd). Based on this theoretical model, it would be expected that providing additional contextual supports such as a learning module would impact a person's performance and preparedness as a FWEd.

*The Fieldwork Educator Competency Module* was designed using guiding principles from cognitive constructivism (UC Berkeley, 2016). Cognitive constructivists approach learning with the beliefs that knowledge is actively constructed by the learner, learners interpret new information and experiences based on existing knowledge, previous experiences, culture, and stage of cognitive development, as well as the role of the teacher is to facilitate discovery by providing the resources learners need to construct new knowledge (UC Berkeley, 2016). Additionally, cognitive constructivists have the assumption that motivation to learn is intrinsic and in order to be successful, learners must have a personal investment in the process.

The development of *The Fieldwork Educator Competency Module* was based on the primary principles of cognitive constructivism's views of knowledge, learning, and motivation (UC Berkeley, 2016). It was assumed that occupational therapy practitioners would approach the module information with preexisting knowledge and experiences that enable them to construct new knowledge regarding how to be a competent FWEd. Using the belief that learning is an active process facilitated by the teacher, the module was developed purposefully to include learning activities designed to lead the participants to personal discovery. Even though components of the module included passive sharing of information, participants were instructed to actively engage with material to construct new knowledge and personal resources. Pre and post assessment allowed the participants to reflect on the new knowledge that had been constructed as a result of the module. Additionally, it is an assumption that the occupational therapists who willingly participated in and completed this module were intrinsically motivated to learn what is required to become a competent FWEd so that they can have a positive impact on future students. Knowing that there will be a time commitment to complete the module, it is



assumed that intrinsic motivation will be a contributing factor leading to successful completion and integration of new knowledge and skills.

Similarly, principles from Malcolm Knowles' theory and model of adult learning (andragogy) were considered during the development of this module (Knowles, et al., 2015). Key principles include the beliefs that adults are internally self-directed, bring life experience and knowledge, are goal oriented, are relevancy oriented, are practical, and like to be respected. These principles were used particularly in the development of the learning activities, hoping that occupational therapy practitioners would be able to see the practical application of the information and resources as well as relevance to the role of FWEd. Occupational therapy practitioners' time is valuable and often limited; therefore, it was essential that all content and learning activities were constructed to be impactful.

### **Significance of the Study**

This study offers great significance to the field of occupational therapy, specifically in the area of fieldwork education. AOTA (2017) adopted *Vision 2025*, which states, "occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living" (p. 1). To prepare therapists to be leaders in the profession and drivers of *Vision 2025*, students must complete fieldwork rotations within high quality sites while mentored by competent FWEds. The results of this study highlight potential methods academic institutions could use to facilitate the transformation of FWEds from a novice level to a competent level. Additionally, this research aligns with the occupational therapy education research agenda published by AOTA (2018c), in which one of the major research goals is to "establish effective methods to prepare occupational therapy faculty to implement best practices in occupational therapy education" (p. 5). A

suggested sample research question focuses on the “qualifications and resources needed by FWEds to provide optimal learning experiences for students” (p. 5). This study offers a method that faculty can use to effectively educate and prepare occupational therapy practitioners for the FWEd role.

### **Summary**

Fieldwork education is a vital component of all academic occupational therapy programs. It serves as a bridge, allowing OT students to apply didactic coursework to real practice. FWEds are essential contributors to this extension of the academic curriculum. For FWEds to function in this role successfully they must possess certain knowledge and skills allowing them to observe students, assess their clinical and professional skills, offer constructive feedback, as well as design intentional and powerful learning opportunities (Stutz-Tanenbaum & Hooper, 2009). Gaps in the literature exist regarding methods used to best prepare occupational therapy practitioners for the role of FWEd. This research investigated how the implementation of a learning module impacts the level of preparedness of FWEds for Level II students.

## **Section 2: Detailed Review of the Literature**

A review of the literature was completed through a comprehensive search of Grand Valley State University's (GVSU) and Eastern Kentucky University's (EKU) library databases, using the following key terms; fieldwork education, fieldwork supervision, fieldwork educator preparation, fieldwork educator competency, fieldwork educator preparedness, Level II fieldwork students, fieldwork educator characteristics, eLearning, and adult learning. The researcher examined documents that have been written and research that has been conducted with regards to effective fieldwork education programs (both academic and clinical), FWEd competency, methods of establishing FWEd competency, needs of FWEds, as well as published works on the topics of adult learning and eLearning. The literature review supported the need for this study and the methods that were used.

### **Fieldwork Educator Competencies and Requirements**

The Commission on Education [COE] (n.d.) compiled a document detailing the desired characteristics and components of fieldwork placements for Level II occupational therapy and occupational therapy assistant students. The intent of the document was to serve as guidelines for academic programs. FWEds for Level II Fieldwork occupational therapy students must have a minimum of one-year clinical experience post initial certification “and be adequately prepared to serve as a fieldwork educator” (COE, n.d., p. 3). The COE recommends therapists to complete continuing education courses specifically related to their role as FWEds in the areas of adult education models and theories, teaching styles, administration and management of a clinical fieldwork program, instructional design, supervision strategies, and evaluation of student performance.

Dickerson (2006) offers a list of FWEd competencies, derived from AOTA's *Standards for Continuing Competence*. The characteristics include knowledge, clinical reasoning, interpersonal skills, performance skills, and ethical reasoning. Of utmost relevance to this document, are the competencies related to knowledge. The standard states, "Occupational therapists and occupational therapy assistants shall demonstrate understanding and integration of the information required for the multiple roles and responsibilities they assume" (Dickerson, 2006, p. 1). As a FWEd, the OT must obtain and integrate necessary knowledge to be able to provide quality fieldwork experiences to the student. High quality fieldwork experiences should lead to the development of entry-level skills and FWEds should develop high-impact learning opportunities, identify individual learning styles, as well as use tailored teaching techniques and supervision styles.

Additional studies (Hunt & Kennedy-Jones, 2010; Kirke et al., 2007) state a good FWEd exhibits many of the characteristics stated above, but adds that they are well prepared in advance of accepting a student, provide students with clear expectations, promote the profession in a positive manner, allow students to learn by making mistakes within a safe environment, and communicate well.

### **Assessment of Fieldwork Educator Competencies**

Occupational therapy practitioners should engage in critical reflection of current clinical skills and knowledge. Additionally, they should identify areas of need as a commitment to lifelong learning and responsibility to the profession (Cranwell, et al., 2020). The same expectation exists for an occupational therapist's role as a FWEd. AOTA (2009a) published the Self-Assessment Tool for Fieldwork Educator Competency (SAFECOM) as a way for FWEds to reflect on their own level of competency in the following areas: professional practice, education,

supervision, evaluation (of student performance), and administration. Based on the results, the FWEd is encouraged to develop a professional development plan to address areas of need.

### **Identified Fieldwork Educator Needs**

“Most fieldwork educators wear at least two hats- the hat of being a practitioner and the hat of being a FWEd. Sometimes, however, a FWEd may naturally identify himself or herself more strongly as a practitioner than as an educator” (Stutz-Tanenbaum & Hooper, 2009, p. 1). Taking on the identity of a FWEd requires more than effective supervisory skills, it requires incorporation of instructional design elements, which when done well, enhances the learning experience of the fieldwork student (Chapman, 2016; Stutz-Tanenbaum & Hooper, 2009). Chapman (2016) states that many clinicians are inadequately prepared to be a FWEd, often relying on their own experiences as a fieldwork student to determine how to fulfill this role. Previous studies document that clinicians feel unqualified and unprepared to effectively supervise students (Barker, 1986; Christie, Joyce, & Moeller, 1985; Cohn & Frum, 1988; Cross, 1992; Kautzmann, 1990, as cited in Mackenzie et al., 2001). Academic fieldwork coordinators face a shortage of quality fieldwork programs (Hunt & Kennedy-Jones, 2010; Kirke et al., 2007), and research has been conducted with the purpose to understand the advantages and barriers that influence a clinician’s decision to become a FWEd. In a study by Hanson (2011), the level of preparedness to assume the role of FWEd was identified as a drawback to working with fieldwork students. Participants in the study discussed the commitment that is required along with the learning curve that exists in teaching clinical skills, documenting student outcomes, developing learning objectives, and adjusting their approach to support the individual needs of students. *The Fieldwork Educator Competency Module* included content that clinicians have stated as challenges and concerns related to participation in fieldwork, such as identifying

student learning needs, assessing student performance, providing feedback, and working with struggling students (Hanson, 2011; Hunt & Kennedy Jones, 2010). Therefore, this module has the potential to allow AFWCs to overcome the fieldwork shortage by increasing the number of FWEds who feel qualified and prepared to assume this role.

Studies also document FWEd resources and supports needed to ensure development and maintenance of quality clinical fieldwork education programs. Hanson (2011) used focus groups to inquire about factors therapists contemplated before accepting fieldwork students. Data suggests that support from the academic program is highly valued, especially with regards to ongoing communication throughout the fieldwork experience, sharing of the student's learning profile, explaining fieldwork expectations, and reviewing the academic curriculum. Additionally, FWEds expressed a desire to receive resources about "providing appropriate feedback, dealing with conflict, and managing struggling students...training updates on the evaluation form and resources for tailoring the learning experience to fit each student" (Hanson, 2011, p. 173). Evenson et al. (2015) conducted a study that resulted in similar findings. Ongoing availability of the academic fieldwork coordinator, free courses related to fieldwork education, and face-to-face meetings between AFWC, student, and FWEd were listed within the top five most valued supports provided by academic programs. Hunt and Kennedy-Jones (2010) studied the needs of novice clinicians, stating that opportunities exist for academic programs to provide learning opportunities to new therapists specific to fieldwork education.

### **Methods for Establishing Fieldwork Educator Competency**

Developing skills as a competent occupational therapy practitioner does not necessarily lead to skill competency and preparedness as a FWEd (Hunt & Kennedy-Jones, 2010). The Commission on Education (n.d.) suggests methods for attaining FWEd competency, including

completion of the AOTA Fieldwork Educator Certificate Program (FWECP), reflection using the SAFECOM, attending continuing education events on the topic, mentorship by experienced FWEs, and completion of online modules. Books on the topic of fieldwork education are also available for occupational therapy clinicians, which contain valuable resources for developing FWE role competency (Costa, 2015). While these resources are valuable, barriers prevent them from being accessible to all occupational therapy practitioners. Evenson et al. (2015) reported that 61% of their study participants were not aware of the AOTA FWECP. Cost of the workshop could also be a barrier for OT practitioners. AOTA members pay \$225, whereas non-members pay \$359 (AOTA, 2018b). Additionally, a study completed by Collins et al. (2019) attempted to identify how occupational therapy practitioners were prepared to assume the role of FWE during their professional education and post professionally, as well as examined the perceived effectiveness of available tools to support their role as a FWE and the barriers that exist when utilizing the available tools (AOTA FWECP, SAFECOM, Fieldwork Experience Assessment Tool, and websites with FWE/preceptor training materials). Overall, the majority of the participants included in the study by Collins et al. (2019) did not use tools and supports that are available to them. The most common barrier identified by participants included a lack of awareness of the tool or lack of knowledge regarding how to access to tool. Cost was listed as the most frequently cited barrier to the AOTA FWECP (Collins et al. (2019).

### **The Adult Learner**

When developing educational or training programs for adult learners, it is important to understand how integrating adult learning theories and principles can enhance the overall effectiveness and desired outcomes. Within the literature, there is no single definition of what it means to be an adult learner. Knowles et al. (2015) first focus on four definitions of *adult*

(biological, legal, social, and psychological) and suggest that the psychological definition is most crucial when it comes to learning. They pose that “psychologically, we become adults when we arrive at a self-concept of being responsible for our own lives, of being self-directing” (p. 62). Several existing theories and models can be used to explain and understand how adults learn. Malcom Knowles’ theory of andragogy identifies six key principles that instructors of adult learners should follow. These principles focus on assumptions that adults need to know why they need to learn something, are self-directed, have experience to draw new learning upon, are internally motivated, are looking for practical learning experiences, and adult learning should focus on solving problems (Collins, 2004; Knowles et al., 2015; Learning Theories, 2017). Bryan et al. (2009) reviewed many of the existing theories (Andragogy, Thiagi’s laws of learning, self-directed learning, adult basic education principles, constructivist learning) and identified recurring themes. They synthesized these themes and developed five key adult learning principles: adults need to know why they are learning; adults are motivated to learn by the need to solve problems; adults’ previous experience must be respected, built upon; learning approaches should match adults’ background, diversity; and adults need to be actively involved in the learning process. In order to be an effective learning approach, adult learning theories and guiding principles need to be thoughtfully considered during development, implementation, and evaluation of *The Fieldwork Educator Competency Module* that was used in this study.

### **E-learning**

The use of e-learning as an educational delivery method is rapidly increasing and is frequently used for providing continuing education to professionals (BeaconLive, 2019; Ghirardini, 2011; Rohwer et al., 2013; Rouleau, et al., 2019; Shah & Stefaniak, 2018). Other terms that are used interchangeably with e-learning in the literature include technology-enhanced



learning, computer-assisted learning, online learning, web-based learning, or internet-based learning (Rouleau, et al., 2019; Shah & Stefaniak, 2018). “eLearning is learning utilizing electronic technologies to access educational curriculum outside of a traditional classroom. In most cases, it refers to a course, program or degree delivered completely online” (eLearningNC.gov, 2019, paragraph 1). Shah and Stefaniak (2018) point out that “e-learning is not merely a delivering agent or a broadcast of information through the medium of internet. It is rather a pedagogical approach that involves instructions that are learner-centered, flexible, and engaging for the learners.” (p. 160). According to Ghirardini (2011), there are two primary e-learning approaches: self-paced (learners are independent) and facilitated/instructor-led (differing levels of support are offered by instructors at varying points and there is also collaboration with other learners). In order to enhance the quality of an e-learning course, it is recommended that the instructor include learner-centered content, granularity (content that is segmented), engaging content, interactivity, and personalization (customized to reflect interests of the learners) (Ghirardini, 2011).

### ***Benefits***

Several advantages of e-learning have been discussed in the literature and there are guidelines that help instructors determine the appropriateness of its use. According to Shah and Stefaniak (2018), E-learning is a cost-effective option compared to face-to-face instructional settings. It allows for content to be delivered to a large number of individuals in an inexpensive manner. Instructors also have the ability to control the content, ensuring that all learners are receiving the same information (Shah & Stefaniak, 2018). E-learning can also be an efficient way for learners to gain new knowledge, especially when using a self-paced approach.

Instructional designers can give learners the ability to skip material they have already mastered

(Shah & Stefaniak, 2018). Additionally, retention can be improved through the incorporation of a variety of teaching strategies that reinforce the content being learned (Shah & Stefaniak, 2018). According to Ghirardini (2011), e-learning is appropriate to use when there is a large amount of content to be delivered to a significant number of learners who live in different regions, when learners lack the ability to be face-to-face and have limited time to devote to learning, when learners can use basic technology successfully, when the instructor anticipates reusing the content for different learners in the future, when content aims to build cognitive skills, and when the instructor/facilitator intends to collect data.

### *Challenges*

It is evident that there are several advantages to using eLearning, however it is important to note that challenges exist as well. With regards to the learner, some common barriers to achieving desired outcomes through eLearning include lack of learner motivation, social isolation, lack of time to fully participate, and difficulty using technology. Challenges faced by the developer/facilitator include lack of technological support when issues arise, decreased ability to match content to current needs of the learners, ineffective use of assessment tools, and overall course design errors such as not incorporating a variety of teaching approaches, missing interactive components, not organized well, and lack of connection to overall objectives (Pappas, 2014, June 25; Pappas, 2014, November 5; Rohwer et al., 2013). Relying on guidelines for developing effective eLearning courses will assist in overcoming some of the challenges listed above.

### *Effectiveness*

Researchers have sought out to determine the effectiveness of eLearning courses within a variety of health-related fields (Rohwer et al., 2013; Rouleau et al., 2019; Shah & Stefaniak, 2018). Rohwer et al. (2013) examined the effectiveness of using an online module to teach the steps of evidence-based medicine (EBM) to postgraduate students. Shah & Stefaniak (2018) completed a literature review study to analyze effectiveness of eLearning to educate physicians or medical students on a new skill or knowledge. A systematic review of existing systematic qualitative, quantitative, and mixed-studies reviews was completed to summarize the literature studying the effects of eLearning of nursing care within a continuing education context (Rouleau, et al., 2019). Findings from these studies and reviews show that eLearning is as effective as traditional, face-to-face instructional methods. Learning related to new skill acquisition and knowledge showed the greatest improvements, however results are likely dependent upon the topic and eLearning course design. Overall, results indicate that participants reported positive attitudes toward effectiveness of eLearning courses (Rouleau, et al., 2019). Questions regarding effectiveness of eLearning courses continue to remain and primarily focus on how the setting, discipline, topic of instruction, and course design impact the desired outcomes. In order to improve effectiveness, it is suggested that instructors should be aware of and responsive to the challenges surrounding the design and implementation of eLearning courses (Rohwer et al., 2013).

## **Section 3: Methods**

### **Project Design**

This study used a quantitative, pre-experimental, one group pretest-posttest research design. Using this particular approach allowed the researcher to obtain numerical data to show whether there was change in the perceived level of preparedness in participants before and after the implementation of the learning module (Creswell & Creswell, 2018b).

### **Setting**

All components of the research, including the pre and post-survey and the learning module, took place in an online, virtual setting, which included the use of Qualtrics (online survey tool) and Rise 360 (online learning platform). The participants were occupational therapy practitioners working in a variety of clinical settings, who were eligible to take on the role as a Level II FWEd. The researcher anticipated that the participants would be practitioners from acute care hospitals, inpatient rehabilitation hospitals, outpatient rehabilitation facilities (associated either with hospital systems or with private clinics), outpatient pediatric facilities, school systems, psychiatric facilities, as well as multiple types of community-based clinics that employ occupational therapists.

### **Identification of Participants**

Study participants were occupational therapists who were eligible to be FWEds for Level II Fieldwork students. According to the Accreditation Council for Occupational Therapy Education (2018), Level II Fieldwork students are required to be supervised by licensed or otherwise regulated occupational therapy practitioners with a minimum of one-year, full-time clinical experience. Participants were identified using convenience sampling and snowball sampling (Dickerson, 2017). As an academic fieldwork coordinator for GVSU's Occupational

Science and Therapy Department, the researcher had access to a database containing contact information for approximately 385 current FWEds located across the country. The researcher also had access to contact information of approximately 480 graduates of the OT program who could be eligible participants in this study. Additionally, with the research mentor being the AFWC from ECU's Department of Occupational Science and Occupational Therapy, participants were recruited by accessing contacts via their alumni FWEd database, consisting of 76 occupational therapists. The survey was also posted on "AOTA CommunOT" (2019), the Occupational Therapy Treatment Ideas & Information Facebook group page, and the School-based Occupational & Physical Therapists Facebook group page.

Inclusion criteria consisted of the following factors: licensed occupational therapist, a minimum of one-year full-time clinical experience as an occupational therapist, and is currently working full-time as an OT practitioner. Exclusion criteria included the following: not a licensed occupational therapist, an occupational therapist with less than one-year full-time clinical experience in the field of OT, and is currently not working full-time as an occupational therapy practitioner. Individuals that did not meet the inclusion criteria had the ability to complete *The Fieldwork Educator Competency Module*, however analysis only included the data recorded from those that met the inclusion criteria.

### **Data Collection Methods**

The primary researcher was responsible for all aspects of data collection. Data was collected using a pre-post survey in the form of self-report measurements (Taylor & Kielhofner, 2017). The SAFECOM (AOTA, 2009a) was used as a guide in the development of the pre and post-surveys. The original 69-question SAFECOM tool uses a 5-point Likert scale to assess FWEd competency in the areas of professional practice (16 questions), education (14 questions),

supervision (14 questions), evaluation (9 questions), and administration (16 questions). The pre and post-surveys for this study were unique and developed by this researcher specifically for the purpose of comparing participant responses regarding their preparedness as a fieldwork educator in the areas of education, supervision, evaluation, and administration, which aligned directly with the competency module content. The full survey tool used for this study can be found in Appendix A. Changes in how FWEs rated themselves between the pre and post-survey determined the effectiveness of the intervention (*The Fieldwork Educator Competency Module*). The questions and self-report scale from the surveys were transferred to Qualtrics (Qualtrics, 2018), an electronic survey platform that was available for use through Grand Valley State University. Informed consent was embedded within the pre-survey and individuals were notified that by proceeding with the survey questions, they were giving their consent to be voluntary participants in the study. The informed consent is located in Appendix B.

The researcher used Rise 360, an online learning platform, to develop the learning module. Links to the pre and post-survey were embedded within the module to improve access to each of the research components. Question 1 of the pre-survey, required participants to consent to the study, and were informed that by clicking *Next*, they were agreeing to be a willing participant. By doing so, they were given access to the remaining pre-survey questions. Following submission of the pre-survey, participants were then allowed to complete *The Fieldwork Educator Competency Module*. Finally, once the module was finished, participants were given access to the post-survey. A link to Rise 360 was emailed to potential participants, whose email addresses were obtained using the approaches described above (the email script is located in Appendix C). A link was also posted to AOTA CommunOT, on the Occupational Therapy Treatment Ideas & Information Facebook group page, and on the School-based

Occupational & Physical Therapists Facebook group page. The module was designed so that participants were required to complete the list of items sequentially, from the pre-survey, through the module content, then to the post-survey. Participants had the ability to start and stop to complete the module at their own pace, however were also provided with a due date for completion. It was anticipated that total time of completion would be 2.0 hours. An outline of the module topics, including the expected time of completion for each topic, can be found in Appendix D. During the pre-survey, participants assigned themselves a unique identifier code that was also used during the post-survey. This allowed the researcher to complete the data analysis (using data from those that meet the inclusion criteria) and confidently report the findings while maintaining anonymity of the study participants. Following completion of all components, participants were able to download a certificate of completion, which could be used for renewal of state licensure and/or renewal of certification through the National Board for Certification in Occupational Therapy. This was an incentive offered to willing participants. A sample certificate of completion can be found in Appendix E.

The SAFECOM was developed by the COE and is recommended as one method clinicians should use to prepare for their role as a FWEd (Dickerson, 2006). This tool is cited in the literature as a useful tool “to help OT and OTA FWEds evaluate their degree of competency in supervising students, while also identifying areas for enhancement and development of necessary skills” (Geraci & Hanson, 2014, p. 7). While psychometric properties of this tool have not been studied, Koski et al. (2013) used the SAFECOM as a basis for the development of the questionnaire utilized in their study, which investigated FWEd behaviors deemed valuable from the perspective of both students and FWEds. Koski et al. (2013) completed a pilot study of their original survey tool, leading to the development of the questionnaire used in the study. The

SAFECOM also served as the basis for the development of a questionnaire used in a study by Suman and Provident (2018), who aimed to determine the effectiveness of using online professional development to increase self-efficacy in school-based OT FWEs.

### **Data Analysis**

Data was analyzed with the use of a computer software program (SPSS Statistics) with the assistance of a statistician. Descriptive statistics consisted of a description of the sample population (Taylor, 2017). Data that was analyzed and reported included the education level, years of clinical experience, type of setting currently working in, as well as completion of the AOTA FWECP or other continuing education courses specific to fieldwork education. Frequency distributions and percentage values of the above characteristics were calculated and presented in table form (Taylor, 2017).

Descriptive statistics was also used to test the hypothesis that completion of the learning module increased the perceived level of preparedness of FWEs for Level II OT students. The researcher ran the McNemar's Test (Laerd Statistics, 2018) in order to examine the change in the perceived level of preparedness following completion of the learning module intervention.

### **Validity**

Threats to validity lead to questions about whether the results of the study reflect what the study intended to achieve. Internal validity threats relate to "procedures, treatments, or experiences of the participants that threaten the researcher's ability to draw correct inferences from the data about the population" (Creswell & Creswell, 2018a, p. 169-170). One potential threat to internal validity included the survey tool being used, since psychometric properties have not been established. However, the SAFECOM was created by AOTA's Commission on



Education and is cited in the literature as a method of self-reflection clinicians should use to identify areas of personal and professional growth specific to their role as a FWEd (Dickerson, 2016; Geraci & Hanson, 2014). It has also been used in other studies as a basis to develop research questionnaires (Koski et al., 2013; Suman & Provident, 2018). Another factor that threatened the internal validity of this study was participant selection. It was anticipated that there would be FWEds participating in the study with varying levels of education (bachelor degree, master's degree, doctorate degree, or special training in the area of fieldwork education), or who have engaged in continuing education specific to their role as a FWEd. In order to mitigate this threat, participants were recruited using a variety of methods to increase the likelihood that the sample included participants with varying levels of experiences.

External validity relates to the researcher's ability to state whether the results of the study were applicable to a larger population or other groups (Creswell & Creswell, 2018a). One potential threat to external validity in this study included the "interaction of selection and treatment". In order to prevent this threat, the researcher was explicit about who the results of the study related to and was cautious to not make claims that the results were generalizable to others when not appropriate. Using the methods described above in "Identification of Participants", individuals were recruited from regions across the country, as an attempt to mitigate this threat.

### **Outcome Measures**

Since participants completed the learning module independently, without interaction with peers or with the developer, the outcome measure (evaluation of learning and changes in perceived preparedness) was a self-assessment through the use of an unstandardized questionnaire. Unstandardized questionnaires are often created for preliminary studies to gather a wide-range of information (Taylor & Kielhofner, 2017). *The Fieldwork Educator Competency*

*Module* was designed to be part of this author's doctoral capstone project, in which it served as the "intervention". A modified version of the SAFECOM (AOTA, 2009a) was used for both pre and post-surveys and the post-survey responses served as the outcome measure. Changes in how FWEds rated themselves between the pre and post-survey determined the effectiveness of the intervention (learning module). Additionally, as the participants completed the module and began to apply the material to develop personal/site-specific resources, they were able to self-identify achievement of learning outcomes.

### **Ethical Considerations**

There were multiple points throughout the research process where ethical issues were anticipated (Creswell & Creswell, 2018c). Outlined below, are several ethical considerations for this study along with ways they were addressed proactively.

The Occupational Therapy Code of Ethics (American Occupational Therapy Association, 2015), was reviewed in detail to ensure that the researcher followed the Principles and Standards of Conduct as each of the six principles specifically include language related to research. Additionally, in order to protect the study participants and prevent ethical issues the researcher obtained approval from Eastern Kentucky University's and Grand Valley State University's Institutional Review Board (IRB).

As the research process continued, the researcher completed a comprehensive literature review in order to identify a research problem that had not been previously studied and is important to the field. During data collection, the informed consent clearly provided the purpose of the study and stated that participants were able to withdraw from the study at any time without consequences. To protect the privacy of the participants during this stage, a unique identification

code was used to maintain anonymity but allowed for adequate data analysis. In addition, Qualtrics is a secure data collection program that protected the privacy of the participants' information.

During the final stage of the research process, there were several potential ethical issues that were considered (Creswell & Creswell, 2018c). In order to prevent such issues from occurring, the researcher honestly reported all data and conclusions, used resources available as guides to prevent plagiarism, used language in all documents throughout the entire research process that was clear, unbiased, and easy for others to understand, disseminated the results to participants as well as disseminated through other methods to give access to a larger number of people (submit for publication to appropriate journals, poster presentations at state and national organizations), maintained records for the recommended 3-year timeframe in a locked cabinet on Eastern Kentucky University's campus and then there are plans to shred records so that they are not accessible to others, and finally credit was given to those that assisted throughout the research process (statistician, research mentor, research committee, etc.) (Creswell & Creswell, 2018c).

### **Timeline of Project Procedures**

The timeline presented in Table 1, outlines the progression of this project from the proposal through final completion of the Capstone Project Report and Capstone Presentation.

**Table 1**

#### ***Capstone Project Timeline***

<b>Capstone Activity</b>	<b>Anticipated Completion</b>
Capstone Project Report- Sections 1, 2, 3	End of Fall B 2019
IRB Application	End of Fall B 2019
IRB Approval	Spring 2019

Begin Participant Recruitment	August 2020
Development of Competency Module	Summer 2020 (ALE)
Implementation (Pre/post survey and Module Completion)	Fall A 2020
Data Analysis	Fall B 2020
Submission of Final Capstone Project Report	Fall B 2020
Capstone Presentation	Fall B 2020

## Section 4: Results and Discussion

### Introduction

The purpose of this Capstone project was to compare how the implementation of a learning module, titled *The Fieldwork Educator Competency Module* altered the perceived level of preparedness of occupational therapy practitioners related to their role as a FWEd for Level II occupational therapy students. Methods were selected and a pre and post survey were developed in order to answer the central research question: What is the variation between pre-post survey results concerning the perceived level of preparedness of occupational therapy practitioners related to their role as a FWEd for Level II occupational therapy students following completion of a learning module? Data collection began on September 4, 2020 and ended on October 18, 2020, providing the information used in the data analysis.

This section includes the results from the data analysis procedures, which were completed via SPSS Statistics software with the assistance of a statistician from Grand Valley State University. Descriptive statistics included frequency distributions and percentage values of the demographic information of the sample population. Descriptive statistics were also used to test the hypothesis that completion of the learning module increased the perceived level of preparedness of FWEs for Level II OT students. The researcher ran the McNemar's Test to determine whether there was a difference in the in the data before and after completion of the learning module intervention. Due to a small sample size, only the descriptive statistics results were reported.

### Results

The primary goal of this research study was to analyze the pre and post-survey responses of each participant, in order to determine the impact of the learning module. To do so, research

participants were instructed to create a unique identifier code that would be used in both surveys. Research participants were recruited using convenience and snowball sampling, resulting in a total of 111 opened pre-surveys and 31 opened post-surveys. Of these, 89 participants fully completed the pre-survey, and 30 completed the post-survey. Given these numbers, the completion rate was 80% and 96.7 % for the pre and post-surveys respectively. Due to snowball sampling, there was no way to determine the total number of potential respondents or calculate a response rate. While all 30 participants who completed the pre-survey, learning module, and the post-survey met the inclusion criteria for this study, only 16 (N=16) established a unique identifier code that matched the pre and post-survey. The responses from these 16 participants were used to complete the data analysis.

### ***Demographics***

Participants were recruited across the country; however demographic results indicate that the majority currently reside in the Midwest (n=11; 68.75%). Table 2 shows the frequency and percentage distributions of respondent residences based on region. The respondents represent occupational therapists from a wide variety of practice settings (see Table 3) including acute care, inpatient rehab, outpatient rehab, skilled nursing/sub-acute rehab, mental health, school-based, and community-based. The majority of the participants (n=9) reported that they have a master's degree (56.25%), whereas 37.5 % (n=6) have a bachelor's degree, and 6.25% (n=1) have an entry-level doctorate. Survey results show that several participants (n=8) have engaged in continuing education related to their role as a fieldwork educator. Types of continuing education included engagement in fieldwork educator workshops hosted by a consortium of academic fieldwork coordinators (43.75%; n=7), completion of AOTA's Fieldwork Educator Certificate Program (12.5%; n=2), as well as an in-service provided by place of employment

(6.25%; n=1). It should be noted that some participants reported completion of a variety of continuing education programs of those that were listed.

**Table 2**

*Participant Residency by Region*

<b>Practice Setting</b>	<b>Frequency</b>	<b>Percentage</b>
Midwest	11	68.75
Southeast	2	12.50
Northeast	1	6.25
Southwest	1	6.25
West	1	6.25

**Table 3**

*Participant Practice Settings*

<b>Practice Setting</b>	<b>Frequency</b>	<b>Percentage</b>
Acute Care	7	43.75
Inpatient Rehab	6	37.50
Outpatient Rehab	3	18.75
Community-based	3	18.75
School-based	2	12.50
Mental Health	1	6.25
Skilled Nursing/Sub-acute Rehab	1	6.25

*Note- Some respondents work in more than one practice setting*

***Descriptive Statistics Results***

SPSS Statistical software was used to run the McNemar's Test to compare pre and post-survey responses for each of the 16 participants. Questions 10-39 of the pre-survey were identical to questions 2-31 of the post-survey (Questions 1-9 on the pre-survey were related to giving consent, questions specific to the inclusion criteria, along with demographic questions). More specifically, pre-survey question 9 matched post-survey question 2, and was the same for

each consecutive question through the end of both surveys. For each of these questions, participants were asked to state whether they strongly agreed, agreed, disagreed, or strongly disagreed, with regards to their level of preparedness as a FWEd related to the different competency areas in this role (administration, education, supervision, and evaluation). In order to run the statistical analysis and determine whether the competency module had a positive impact on the perceived preparedness of participants, the responses on both the pre and post-survey for *Strongly Agree* and *Agree* were categorized as *Agree*. Similarly, the responses on both surveys for *Strongly Disagree* and *Disagree* were categorized as *Disagree*. For each question, results indicate there was either no change in participants' level of preparedness (either responses remained *Agree* or *Disagree* from pre to post-survey) or there was an increase in participants' level of preparedness (responses changed from *Disagree* to *Agree* from pre to post-survey).

Table 4 shows the results of the crosstabulation frequency table from the McNemar's Test. In the first column, the questions (Q) from the pre and post-survey are listed. Columns two through four provide the frequency for which the responses either remained unchanged (from *Agree* to *Agree* or *Disagree* to *Disagree*) or improved from *Disagree* to *Agree* following completion of the competency module. Results indicate a positive change for at least one participant for each question, with the exception of Q35/Q27, which related to feeling prepared to schedule formal meetings with students to guide the fieldwork experience. However, when reviewing the raw data, there were 6 participants that reported a change from *Agree* to *Strongly Agree*, indicating a change in the overall level of preparedness. For 15 of the 28 questions that were analyzed, there were at least 25% of the respondents who reported a positive change from disagree to agree ( $n \geq 4$ ). Interestingly, the question where the largest number of respondents ( $n=10$ ; 62.5%) reported a change in their level of preparedness, was "I feel well prepared to self-



identify and implement a fieldwork educator professional development plan to further my skills as a fieldwork educator”. Furthermore, 56.25% of respondents (n=9) identified a change in preparedness with regards to using current supervision models and theories to facilitate student performance and professional behavior (Q14/Q6), and 50% (n=8) reported a positive change related to feeling prepared to designing and implementing a fieldwork program in accordance to accreditation standards (Q33/Q25) as well as feeling prepared to identify the legal and healthcare policies that influence fieldwork and supervision guidelines (Q37/Q29).

**Table 4**

*Pre and Post-Survey Responses*

<b>Pre/Post Survey Question (Q)</b>	<b>Frequency of Responses: Agree to Agree</b>	<b>Frequency of Responses: Disagree to Disagree</b>	<b>Frequency of Responses: Disagree to Agree</b>
Q10/Q2	14	0	2
<b>Q11/Q3</b>	<b>11</b>	<b>1</b>	<b>4</b>
Q12/Q4	13	0	3
<b>Q13/Q5</b>	<b>5</b>	<b>1</b>	<b>10</b>
<b>Q14/Q6</b>	<b>6</b>	<b>1</b>	<b>9</b>
Q15/Q7	14	0	2
Q16/Q8	14	0	2
Q17/Q9	13	0	3
Q18/Q10	12	1	3
Q19/Q11	14	0	2
<b>Q20/Q12</b>	<b>10</b>	<b>1</b>	<b>5</b>
Q21/Q13	13	0	3
Q22/Q14	13	0	3
<b>Q23/Q15</b>	<b>10</b>	<b>0</b>	<b>6</b>
Q24/Q16	15	0	1
Q25/Q17	14	0	2
Q26/Q18	15	0	1
<b>Q27/Q19</b>	<b>8</b>	<b>1</b>	<b>7</b>
<b>Q28/Q20</b>	<b>11</b>	<b>1</b>	<b>4</b>
<b>Q29/Q21</b>	<b>11</b>	<b>0</b>	<b>4</b>

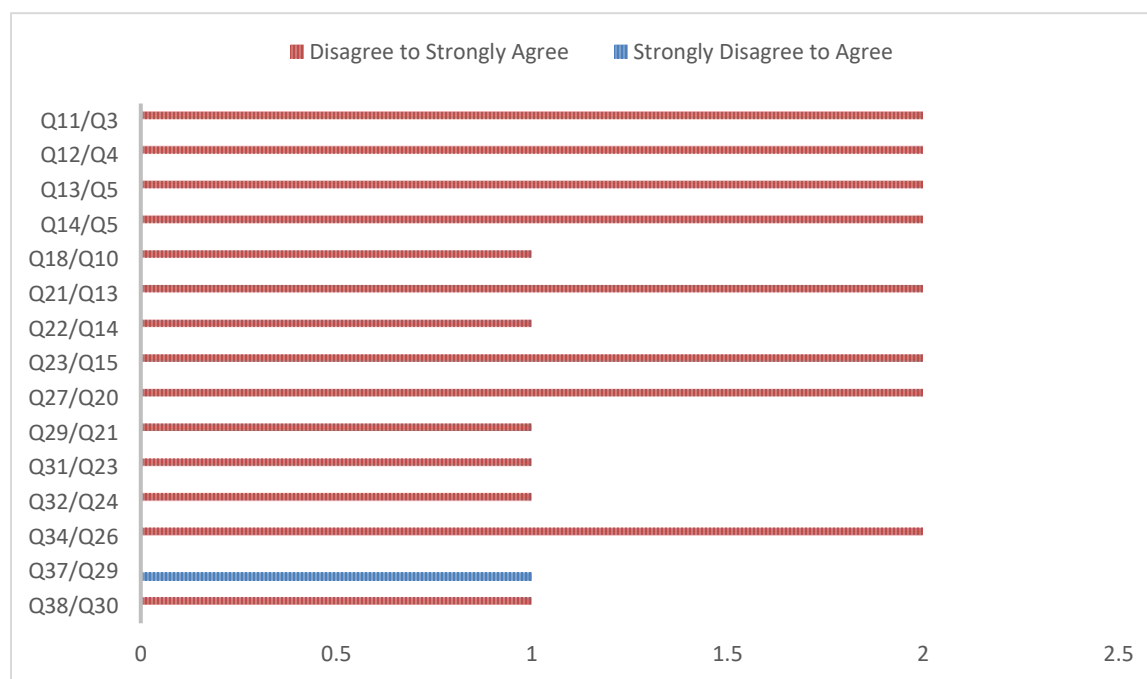
Q30/Q22	12	0	3
<b>Q31/Q23</b>	<b>9</b>	<b>1</b>	<b>5</b>
<b>Q32/Q24</b>	<b>8</b>	<b>0</b>	<b>6</b>
<b>Q33/Q25</b>	<b>6</b>	<b>2</b>	<b>8</b>
<b>Q34/Q26</b>	<b>8</b>	<b>2</b>	<b>6</b>
Q35/Q27	16	0	0
<b>Q36/Q28</b>	<b>12</b>	<b>0</b>	<b>4</b>
<b>Q37/Q29</b>	<b>7</b>	<b>1</b>	<b>8</b>
<b>Q38/Q30</b>	<b>11</b>	<b>1</b>	<b>4</b>
Q39/Q31	12	1	3

This researcher found value in reviewing the raw data in order to determine the competency areas where participants reported the greatest level of change in preparedness, as indicated by a change in response from *Disagree* to *Strongly Agree* or from *Strongly Disagree* to *Agree* following completion of the competency module. Figure 1 illustrates this data with the pre and post-survey questions listed in the vertical axis and frequency of responses in the horizontal axis. Changes from *Disagree* to *Strongly Agree* are depicted in red, whereas *Strongly Disagree* to *Agree* are in blue. It is worthwhile to note that the greatest level of change was related to the following FWEd competency areas; using a variety of instructional strategies, demonstrating sensitivity to student learning styles and adapting approach, implementing a fieldwork educator professional development plan, using current supervision models and theories, progressing supervisory approaches and changing approach depending on student needs, providing the student with prompt, direct, and constructive feedback, identifying personal style of supervision and adapting based on student needs, collaborating with academic fieldwork coordinator to modify the learning environment and integrate the academic curriculum, reviewing the evaluation tool and entry-level expectations with student, using the evaluation tool accurately to measure student performance, seeking feedback from AFWC to develop a fieldwork program,

documenting an organized fieldwork program including fieldwork manual, student expectations and objectives, identifying the legal and healthcare policies that influence fieldwork and supervision guidelines, as well as completing an orientation for the student.

**Figure 1**

***Greatest Change in Level of Preparedness***



**Discussion**

The purpose of this study was to investigate the impact of the *Fieldwork Educator Competency Module* on occupational therapists' perceived level of preparedness with respect to their role as fieldwork educators for Level II OT students. While participation was limited, descriptive analysis of the data shows that overall, the learning module had a positive impact on the perceived level of preparedness. This study was unique from existing literature, in that it included the use of an online learning module, designed by the researcher for occupational therapy practitioners, specifically for the purpose of improving their level of preparedness as a

fieldwork educator. Additionally, it was a preliminary study that aimed to examine the effectiveness of the online learning module, providing evidence to support its use by occupational therapy programs and academic fieldwork coordinators.

### ***Identified Areas of Need***

The pre-survey results provided insight into the competency areas that occupational therapists feel least prepared as a fieldwork educator. A rating of *Strongly Disagree* was reported with regards to feeling prepared to identify and implement a fieldwork educator professional development plan, anticipate and prepare students for challenging situations, present clear expectations of performance throughout the fieldwork experience, initiate interaction to resolve conflict and raise issues of concern, communicate and collaborate with academic programs to integrate the academic curriculum, seek support from the AFWC to develop a fieldwork program, collaborate with AFWC to implement a fieldwork program in accordance to accreditation standards, document an organized fieldwork program including a fieldwork manual, student expectations and site-specific objectives, as well as identify legal and health care policies that directly influence fieldwork including supervision guidelines. Following analysis of the pre and post-survey results, at least 25% of participants reported a positive change in all areas listed above, with the exception of feeling prepared to anticipate and prepare students for challenging situations and to present clear expectations of performance throughout the fieldwork experience. With respect to both of these competency areas, 2 participants indicated a change in their level of preparedness from either *Strongly Disagree* or *Disagree* to *Agree*.

The identified areas of need stated above, relate to what has previously been reported in the literature. In a study by Hanson (2011), when indicating the types of support that was valued before and during Level II OT Fieldwork placements, participants emphasized the need for

ongoing communication and support from the AFWC. They also stated that it was important for expectations to be communicated to the student, expressed an interest in receiving information from the academic program regarding how the curriculum and accreditation standards are addressed, shared that it would be helpful to have an in-service on entry-level expectations, and specified the need for learning more about fieldwork supervision in general, including details about fieldwork forms, weekly expectations, site-specific objectives, etc. Additionally, the participants reported that they needed more support and resources from the AFWC on how to provide appropriate feedback, deal with conflict, manage challenging students, effectively use the fieldwork evaluation form, and how to tailor the fieldwork experience to fit each individual student's needs (Hanson, 2011). Furthermore, Chapman (2016) discussed how occupational therapists often enter the role of FWEd without adequate preparation, lacking appropriate skills related to instructional design. This directly relates to this study's results, as participants reported a lack of preparedness with integrating the academic program's curriculum into the fieldwork experience, implement a fieldwork program in accordance to accreditation standards, as well as present clear expectations to students throughout the fieldwork experience. Varland, et al. (2017) reported several factors that impact an occupational therapist's decision to supervise fieldwork students. The study by Varland, et al. (2017) directly relates to the outcomes of this research, in that it indicated how education specific to being a FWEd is a key solution to increasing a therapist's willingness to serve in this role. Many of the participants from Varland et al. (2017) discussed the need for more resources related to supervision strategies, learning styles, fieldwork expectations, addressing difficult student issues and how to facilitate learning.

### ***Impact of Competency Module***

With respect to each competency area addressed in the pre and post-survey, an overall positive change in level of preparedness was reported. As stated previously, the results of the McNemar's statistical results showed no change in feeling prepared to schedule formal and informal meetings with the student to guide the fieldwork experience, however the raw data demonstrated that 37.5% (n=6) participants improved their level of preparedness as indicated by a change in response from *Agree* to *Strongly Agree*. Furthermore, review of the data highlighted the frequency of responses of *Disagree* decreased as a whole following completion of *The Fieldwork Educator Competency Module*. The range in frequency of *Disagree* responses on the pre-survey was 10 (11-1), however on the post-survey, the range was 1 (2-1). These results support the researcher's hypothesis that the perceived level of preparedness would improve following completion of the learning module. While as a whole this is true, it is important to note which competency areas where participants provided a response of *Disagree* on the post-survey, in order to identify ways in which the learning module could be improved, even though the frequency of response was minimal, at either 6.25% (n=1) or 12.5% (n=2). Of particular interest, are the competencies related to feeling prepared to collaborate with the AFWC to integrate the academic curriculum during fieldwork, to design and implement a fieldwork program in collaboration with the AFWC in accordance to accreditation standards, and to document an organized fieldwork program while including a fieldwork manual, student expectations and site-specific objectives. Review of the raw data showed that 6.25% (n=1) of participants provided a response of *Strongly Disagree* on the post-survey with respect to these competency areas.

The learning module appeared to have the greatest impact on participants' preparedness with respect to the following; (1) identify and implement a fieldwork educator professional development plan, (2) use current supervision models and theories to facilitate student

performance, (3) communicate and collaborate with the AFWC to integrate the academic curriculum design during fieldwork, (4) design and implement a fieldwork program in collaboration with the AFWC in accordance to accreditation standards, and (5) identify the legal and healthcare policies that directly influence fieldwork, including fieldwork supervision guidelines. Moreover, it can be deduced that the competency module improved participants' level of preparedness in other competency areas, including using a variety of instructional strategies to facilitate the learning process, initiating interaction to resolve conflict and raise areas of concern, collaborating with the AFWC to identify and modify the learning environment when faced with a struggling student, completing the required fieldwork paperwork in a timely manner, reviewing the evaluation tool and entry-level expectations with the student, as well other administrative tasks involving the development of site-specific student expectations and student orientation.

In a similar study by Mackenzie, et al. (2001), where researchers examined the outcomes of a workshop designed for occupational therapy fieldwork supervisors in New South Wales, it was reported that the workshop sessions that addressed learning styles, giving feedback, and goal setting, had the most positive impact on participants. Post-workshop feedback offered suggestions for future workshops, including alternative formats and topics of interest. Participants from Mackenzie et al. (2001) recommended that a self-directed workshop could be made available and proposed that workshops be recorded and shared virtually for those that could not attend in-person. Future topics included assessment of student performance, supervision strategies, conflict resolution, working with students with disabilities, as well as the development of learning agreements when faced with struggling students (Mackenzie et al., 2001).

## **Limitations**

The greatest limitation of this study was the small sample size; therefore, this study represents only a portion of practicing occupational therapists, who are eligible to be fieldwork educators for Level II OT students. Geographically speaking, the results primarily represent the perceptions of occupational therapists living in the Midwest regions of the United States. Even though convenience and snowball sampling were used, recruitment was impacted by the COVID-19 pandemic. Originally, this researcher anticipated the opportunity to recruit participants via networking at the American Occupational Therapy Association's Annual Conference & Expo, in April of 2020. Unfortunately, the conference was converted into a virtual platform, therefore, face-to-face recruitment was not an option.

Upon initial review of the survey results, it looked promising that there was a significant number of participants who completed the entire pre-survey, learning module, and post-survey, however following data analysis, it was found that only 16 participants had followed the instructions provided to create a unique identifier that was consistent in both the pre and post-survey. This error highlighted a limitation in the research methods. If completing a similar study in the future, this researcher would make certain that the process of creating and using a unique identifier was made clearer to participants. It was interesting to note that there was a total of 111 opened pre-surveys and 31 opened post-surveys. Of these, 89 participants fully completed the pre-survey, and 30 completed the post-survey. This researcher questioned why there was such a discrepancy between the number of completed surveys. It is likely that potential participants experienced insufficient time to complete all three components. Additionally, since the learning module was completed in an asynchronous format, there could have been issues with technology that were not able to be addressed, or the participants may have decided not to complete the



learning module in its entirety due to a lack of ability to interact, engage, and discuss with peers and the researcher, which have been previously reported as barriers in the literature (Pappas, 2014, June 25; Pappas, 2014, November 5; Suman & Provident, 2018). Furthermore, another potential limitation to the use of an online learning module could be related to the concept of “Zoom fatigue”, which is the overall tiredness or burnout associated with overusing virtual platforms (Lee, 2020). This is a relatively new term that was developed during the COVID-19 pandemic, as a result of having to move meetings, conferences, and other aspects of our professional and personal social interactions to virtual platforms. With the requirement to engage virtually across so many facets of daily life, potential participants may have opted to not complete the online learning module due to burnout.

Finally, the use of self-report through non-standardized questionnaires was also identified as a limitation to this study. The participants may have been influenced by social desirability or may have been embarrassed to respond honestly. In order to control for these limitations, participants were allowed to remain anonymous. Even though the questionnaires were non-standardized, they were developed by using the SAFECOM as a guide. The SAFECOM was created by AOTA’s Commission on Education and is cited in the literature as a method of self-reflection clinicians should use to identify areas of personal and professional growth specific to their role as a FWEEd (Dickerson, 2016; Geraci & Hanson, 2014). It has also been used in other studies as a basis to develop research questionnaires (Koski et al., 2013; Suman & Provident, 2018).

### **Implications for Practice**

Results of this study revealed that the use of *The Fieldwork Educator Competency Module* made a positive impact on the overall level of preparedness of occupational therapists to

serve as FWEds for Level II OT students. This module could have implications on the fieldwork shortage reported in the literature due to a lack of clinicians who are both qualified and competent to serve as FWEds (Evenson et al., 2015; Hunt & Kennedy-Jones, 2010; Kirke et al., 2007). Prior to the start of fieldwork rotations, the module could be shared electronically with all assigned fieldwork educators so that they have the option to complete if desired. FWEds could be instructed to complete the SAFCOM to determine their specific growth areas, so that they only need to complete the portions of the module that directly correlate. This module also serves as an accessible, low-cost, and flexible option for obtaining continuing education specific to fieldwork education. There is potential for sharing this learning module with AFWCs across the country to be utilized in their regions, leading to an increased number of fieldwork educators prepared to design and implement effective learning experiences to a large number of occupational therapy students.

Outcomes highlighted the competency areas that were identified as areas of need, which could be used to inform future implementation of the module. Additionally, the data showed which aspects of *The Fieldwork Educator Competency Module* were most effective with regards to improving overall preparedness. This leads the researcher to conclude that those parts of the module should be included if used in the future with other fieldwork educators for Level II occupational therapy students. Moreover, there may be aspects of the learning module that could be modified to enhance the overall effectiveness, as indicated by unchanged participant responses between the pre and post-survey.

### **Future Research**

This study illustrates one method that can be used to increase the level of preparedness of occupational therapists in their role as a fieldwork educator. In order to determine the statistical

significance in the overall effectiveness of *The Fieldwork Educator Competency Module* specifically, future research should be conducted with an emphasis of increasing the sample size. Furthermore, with a larger sample size, the outcomes would likely represent perspectives of OTs from regions across the country. Altering the inclusion criteria to allow for recent graduates with less than one-year clinical experience would be beneficial in an effort to increase the sample size, but to also determine if years of clinical experience impacts the perceived level of preparedness to serve as a fieldwork educator for Level II OT students. In order to examine whether or not clinical experience has an effect, one would also need to alter the survey to specifically require participants to report years of experience.

Future research could also be conducted to explore the perceptions of the participants with regards to the effectiveness of the online format and platform used in the development of *The Fieldwork Educator Competency Module*. Results of such a study could have implications on determining the most effective method of content delivery. Additionally, a study comparing the results of an in-person workshop, versus completion of the online module could lead to a better understanding of best-practices for preparing occupational therapy practitioners to be effective fieldwork educators.

## **Conclusion**

In order to ensure continuation of high-quality fieldwork education in the field of occupational therapy, identification of best practices for establishing FWEd competency and preparedness is critical. This research project offers significance to the occupational therapy profession, specifically related to the preparedness of fieldwork educators of Level II occupational therapy students. Outcomes show that the use of an online learning module, titled *The Fieldwork Educator Competency Module* had a positive impact on the overall level of

preparedness of those that participated. This module could be an effective method that academic fieldwork coordinators can use in order to enhance the level of preparedness of OTs with regards to serving as fieldwork educators, and by doing so, increase the number of therapists who are willing to be FWEds for Level II OT students. Academic programs and academic fieldwork coordinators should consider the outcomes of this study in their own plans for ensuring fieldwork educator preparedness, as they indicate a positive impact through the use of a low-cost, accessible, and flexible method.

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## Appendix A: Survey

1. Informed Consent
2. Are you a licensed or otherwise regulated occupational therapist with a minimum of 1-year practice experience as an occupational therapist?
  - a. Yes
  - b. No
3. Are you currently employed as a full-time occupational therapy practitioner?
  - a. Yes
  - b. No
4. In order to be able to complete a statistical analysis of the pre and post-survey, you will need to create a unique identifier code. You will re-enter this code in the post-survey. The unique ID allows for statistical analysis, while remaining anonymous. Please use these guidelines to create your unique ID so that you will be able to remember for the post-survey.

First letter of county of residence, year you graduated high school, second initial of last name, and year you graduated from your occupational therapy program.

Example:

County= Manistee

Year graduated high school= 1995

Last name= Johnson

Year graduated from OT program= 2004

Unique ID= m1995o2004

5. In the past, have you participated in continuing education offerings specific to the role of fieldwork educator? (i.e.: AOTA Fieldwork Educator Certificate Workshop or workshops hosted by an academic program on topics related to fieldwork education).
  - a. Yes
  - b. No
6. If yes, please explain.
7. What is the highest academic degree you have earned?
  - a. Bachelor's Degree
  - b. Master's Degree
  - c. Entry-level Doctorate Degree
  - d. Post-professional Doctorate Degree
  - e. Ph.D.
8. Which region of the country do you live in?
  - a. Midwest - IA, IL, IN, KS, MI, MN, MO, ND, NE, OH, SD, WI
  - b. Northeast - CT, DC, DE, MA, MD, ME, NH, NJ, NY, PA, RI, VT
  - c. Southeast - AL, AR, FL, GA, KY, LA, MS, NC, SC, TN, VA, WV
  - d. Southwest - AZ, NM, OK, TX
  - e. West - AK, CA, CO, HI, ID, MT, NV, OR, UT, WA, WY
9. What type of setting do you work in? Check all that apply.
  - a. Inpatient Rehab
  - b. Acute Care
  - c. Outpatient
  - d. School

- e. Mental Health
- f. Community-based
- g. Other

10. I feel well prepared to sequence learning experiences to grade progression toward entry-level practice.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

11. I feel well prepared to use a variety of instructional strategies to facilitate the learning process (such as role play, modeling, co-treat, videotaping, etc.)

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly

12. I feel well prepared to demonstrate sensitivity to student learning style to adapt teaching approach for diverse student populations.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

13. I feel well prepared to self-identify and implement a Fieldwork Educator Professional Development plan to further my skills as a fieldwork educator.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

14. I feel well prepared to use current supervision models and theories to facilitate student performance and professional behavior.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

15. I feel well prepared to anticipate and prepare students for challenging situations.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

16. I feel well prepared to present clear expectations of performance throughout the fieldwork experience, appropriate to entry-level OT practice.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

17. I feel well prepared to provide activities that challenge student's optimal performance.

(1) Strongly Disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

18. I feel well prepared to use a progression of supervisory approaches throughout the student learning cycle (adapts the amount and type of supervision, changes approach to support student learning, challenges student at current level of performance) to facilitate student performance.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

19. I feel well prepared to use a variety of strategies to provide communication and feedback to promote student professional development (verbal, non-verbal, group, direct, indirect).

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

20. I feel well prepared to initiate interaction to resolve conflict and to raise issues of concern.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree



21. I feel well prepared to provide the student with prompt, direct, specific, and constructive feedback throughout the fieldwork experience.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

22. I feel well prepared to identify personal style of supervision and to adapt the approach in response to the student's performance.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

23. I feel well prepared to collaborate with the student and academic fieldwork coordinator to identify and modify learning environments when student experiences difficulty.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

24. I feel well prepared to elicit and respond to student's feedback and concerns.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

25. I feel well prepared to assess student according to performance standards based on objective information (e.g., direct observation, discussion with student, review of student's documentation, observation by others, etc.).

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

26. I feel well prepared to facilitate student self-reflection and self-assessment throughout the fieldwork and evaluation process.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

27. I feel well prepared to communicate and collaborate with academic programs to integrate the academic curriculum design during fieldwork.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

28. I feel well prepared to complete and provide the academic program with required paperwork (AOTA Data form, site-specific objectives, final performance evaluation, etc.) in a timely manner.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

29. I feel well prepared to review the evaluation tool and expected entry-level expectations with the student prior to midterm and final.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

30. I feel well prepared to assess student's performance based on appropriate entry-level roles of the practice setting.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

31. I feel well prepared to use fieldwork evaluation tools to accurately measure student performance and provide feedback.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

32. I feel well prepared to seek support from the academic fieldwork coordinator to develop and implement a student fieldwork program.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

33. I feel well prepared to design and implement a fieldwork program in collaboration with the academic fieldwork coordinator in accordance to ACOTE Standards for Level II Fieldwork.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

34. I feel well prepared to document an organized, systematic, fieldwork program (fieldwork manual, student expectations and site-specific objectives, etc.).

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

35. I feel well prepared to schedule formal and informal meetings with the student to guide the fieldwork experience.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

36. I feel well prepared to collaborate with the student to develop student learning objectives.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

37. I feel well prepared to identify the legal and health care policies that directly influence fieldwork, including fieldwork supervision guidelines.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

38. I feel well prepared to complete an orientation for the student to the fieldwork site, including policies, procedures, student expectations, responsibilities, etc.

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

39. I feel well prepared to conduct ongoing fieldwork program evaluations and monitor the change in the program with student and staff input (self-assessment, student assessment, etc.).

(1) Strongly disagree

(2) Disagree

(3) Agree

(4) Strongly Agree

## Appendix B: Informed Consent

### Fieldwork Educator Competency: A Study Examining the Effect of an Online Learning Module on the Perceived Competency Levels of Fieldwork Educators

You are invited to participate in a research study. Researchers are required to provide a consent form to inform you about the research study, to convey that your participation is voluntary, to explain the risks and benefits of participation, and to empower you to make an informed decision. You should feel free to ask the researchers any questions you may have.

This research study is being led by Breanna Chycinski, MS OTRL, faculty member of the Occupational Science and Therapy Department at Grand Valley State University and student of Eastern Kentucky University's Doctorate of Occupational Therapy program.

The purpose of this quantitative pre-post survey is to compare how the implementation of a competency module, titled *The Fieldwork Educator Competency Module* alters the perceived level of competence of occupational therapy practitioners related to their role as a fieldwork educator for Level II occupational therapy students.

Should you agree to participate in this study, you will be asked to complete the following: pre-survey, *The Fieldwork Educator Competency Module*, and a post-survey. The pre and post-survey will be identical, with the exception that the pre-survey will include a list of questions about your demographics. Both surveys will include a list of questions about your perceptions regarding your level of preparedness as a fieldwork educator in the areas of education, supervision, evaluation, and administration. It is estimated that each survey will take 5 minutes to complete. *The Fieldwork Educator Competency Module* is a self-paced online module that you will be asked to complete independently. It is defined as an online training module that will

include content areas such as the purpose and goals of Level II Fieldwork, fieldwork guidelines, how to create a successful fieldwork program, how to facilitate student progression towards entry-level practice, modifying supervision styles to match the needs of the student, and effective tools for providing feedback as well as evaluating the Level II Fieldwork student. The module will consist of a series of videos and resources. The researcher estimates that the module will take two hours to complete. Participants will be able to complete the module at their own pace with the ability to start and stop at their convenience.

There are no known risks if you decide to participate in this research study. There are no costs to you for participating in this study. By completing this study, participants may benefit by gaining new knowledge and skills essential to the role of fieldwork educator. Additionally, if participants complete the pre-survey, competency module, and post-survey, a certificate of completion will be awarded, which could be used towards re-certification/license renewal depending on the regulations set forth by the participant's state OT licensing board. The information collected may not benefit you directly, but the results will help to determine if an online competency module is an effective tool that occupational therapy programs can use to ensure preparedness and competency of fieldwork educators.

This survey is anonymous. No one will be able to identify you or your answers, and no one will know whether or not you participated in the study. All information collected from you or about you is for the sole purpose of this research study and will be kept confidential to the fullest extent allowed by law. In very rare circumstances, specially authorized university or government officials may be given access to our research records for purposes of protecting your rights and welfare or to make sure the research was done properly. Should the data be published, no identifying information will be disclosed.

Your participation in this research study is completely voluntary. You do not have to participate. You may skip any question or quit at any time without any penalty to you. The information collected will be used for the stated purposes of this research project only and will not be provided to any other party for any other reason at any time except and only if required by law. You should be aware that although the information you provide is anonymous, it is transmitted in a non-secure manner. Electronic data will be collected and/or stored for this research project. As with any use of electronic means to store data, there exists a minimal risk that data could be lost or stolen. There is a remote chance that skilled, knowledgeable persons unaffiliated with this research project could track the information you provide to the IP address of the computer from which you send it. However, your personal identity cannot be determined.

Your participation in this research study would be greatly appreciated.

Thank you in advance.

If you have any questions about the study you may contact:

NAME: Breanna Chycinski  
E-MAIL: [chycinbr@gvsu.edu](mailto:chycinbr@gvsu.edu)

PHONE: 616-331-5623

If you have any questions about your rights as a research participant, please contact the **Office of Research Compliance & Integrity** at Grand Valley State University, 1 Campus Drive, Allendale, MI. Phone: 616-331-3197. E-mail: [rci@gvsu.edu](mailto:rci@gvsu.edu).

This study has been reviewed by the Institutional Review Board at Grand Valley State University (Protocol #20-157-H).

By clicking next, you are agreeing to the following:

- The details of this research study have been explained to me, including what I am being asked to do and the anticipated risks and benefits;



- I have had an opportunity to have my questions answered;
- I am voluntarily agreeing to participate in the research as described on this form;
- I may ask more questions or quit participating at any time without penalty.
- I give my consent to participate in this research project.

### **Appendix C: Email Script**

You are invited to participate in a research study conducted by Breanna Chycinski, MS OTRL, who is an assistant professor and academic fieldwork coordinator in the Occupational Science and Therapy Department at Grand Valley State University and a Doctor of Occupational Therapy student in Eastern Kentucky University's Occupational Therapy and Occupational Science Department. The purpose of this quantitative pre-post survey is to compare how the implementation of a competency module, titled The Fieldwork Educator Competency Module alters the perceived level of competence of occupational therapy practitioners related to their role as a fieldwork educator for Level II occupational therapy students. You have been selected as a potential participant in this study as you are currently an occupational therapist who is qualified to serve as a fieldwork educator for Level II occupational therapy fieldwork students. The researcher hopes to determine whether completion of an online module is an effective method for preparing occupational therapists for the role of fieldwork educator.

Should you agree to participate in this study, you will be asked to complete the following: pre-survey, The Fieldwork Educator Competency Module, and a post-survey. The pre and post-survey will be identical, with the exception that the pre-survey will include a list of questions about your demographics. Both surveys will include a list of questions about your perceptions regarding your level of preparedness as a fieldwork educator in the areas of education, supervision, evaluation, and administration. It is estimated that each survey will take 10 minutes to complete. The Fieldwork Educator Competency Module is a self-paced online module that you will be asked to complete independently. It is defined as an online training module that will include content areas such as the purpose and goals of Level II Fieldwork, fieldwork guidelines, how to create a successful fieldwork program, how to facilitate student progression towards

entry-level practice, modifying supervision styles to match the needs of the student, and effective tools for providing feedback as well as evaluating the Level II Fieldwork student. The module will consist of a series of videos to review along with resources for you to use in practice. The researcher estimates that the module will take two hours to complete. Participants who complete the pre-survey, competency module, and post-survey will receive a certificate of completion that could be used towards continuing education requirements for recertification/license renewal, depending on the regulations set forth by your state licensing board.

If you choose to participate in this research project, please click on the following link which will direct you to the pre-survey, competency module, and post-survey:

<https://rise.articulate.com/share/wzMvRJYHFNY2SmPvJuR89t4IWvz0tvAM>

Thank you in advance!

Kindly,

Breanna Chycinski, MS OTRL

Doctor of Occupational Therapy Student

Eastern Kentucky University

[breanna\\_chycinski@mymail.eku.edu](mailto:breanna_chycinski@mymail.eku.edu)

This study has been approved by the Grand Valley State University Institutional Review Board committee. Any questions about human rights issues should be directed to the Office of Research Compliance and Integrity at 616-331-3197.

## **Appendix D: Fieldwork Educator Competency Module Outline of Topics**

- I. Introduction: Purpose and Goals of Level II Fieldwork- 11.55 minutes
  - a. Purpose of Fieldwork
    - i. Professional behaviors, clinical skills, prepare for national board exam
  - b. Goal of Level II Fieldwork
    - i. Become an entry-level generalist practitioner
  - c. Fieldwork Guidelines
    - i. Program requirements, site requirements, accreditation requirements
- II. Administration: Creating a Successful Fieldwork Program- 22.8 Minutes
  - a. Explanation of Roles
    - i. Roles of the academic fieldwork coordinator
    - ii. Roles of the site coordinator (if applicable)
    - iii. Roles of fieldwork educator
  - b. Starting a New Fieldwork Program and Required Documents
    - i. Affiliation Agreements
    - ii. Required Documents per Accreditation
  - c. Fieldwork Manual/Binder
- III. Education: How to Facilitate Progression Towards Entry-Level Practice- 20.47 minutes
  - a. Learning Theories and Learning Styles
  - b. Identifying and Meeting the Needs of Students
- IV. Supervision- Modifying Supervision Style to Match Student Needs- 36.32 Minutes
  - a. Supervision Requirements
  - b. Supervision Styles/Models

- c. Challenging Fieldwork Situations
- V. Evaluation: Effective Tools for Student Evaluation and Feedback- 26.21 Minutes
- a. Feedback
  - b. Formal Evaluation
  - c. Evaluation of the Fieldwork Experience
    - i. Student Evaluation of the Fieldwork Experience
    - ii. Fieldwork Educator Self-Assessment

Appendix E: Certificate of Completion

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**CERTIFICATE** *Of* **COMPLETION**

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**Recipient Name**

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Has successfully completed

**THE FIELDWORK EDUCATOR COMPETENCY MODULE  
2.0 CONTACT HOURS**

**PRESENTED BY:** *Breanna Chycinski, MS OTR  
Grand Valley State University*

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**ON THIS DAY:** *Enter date*

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