



WORCESTER STATE UNIVERSITY

Please return to: Jacqueline Brennan, MS, OTR/L
Worcester State University
Occupational Therapy Dept.
486 Chandler Street
Worcester, MA 01602

Level I Fieldwork Experience Evaluation
OT 318 Physiological Therapeutic Approaches Lab

Student Name: _____ FW Dates: _____

Facility Name: _____

Address: _____

FW Educator Name: _____ Credentials: _____

FW Educator Email: _____ Phone: _____ Fax: _____

Key to Program Threads:

Professional Behaviors (PB) Clinical Reasoning (CR) Evidence-Based (EB) Person-Environment-Occupational Performance (PEOP)

Grading Criteria:

Meets Expectation (ME): Behaviors at least 85% of the time

Needs Improvement (NI): Behaviors exhibited 50-84% of the time

Unsatisfactory Performance (UP): Behaviors exhibited less than 50% of the time

Thread	Criteria (Student objectives for Level I Fieldwork)	ME	NI	UP	N/A
PB	Abides by HIPAA regulations				
PB	Abides by clinical setting guidelines: dress, punctuality, hygiene				
PB, CR	Uses good judgment in regard to safety of self and others: asks if unsure				
PB, PEOP	Displays sensitivity to differences in culture and values				
PB	Uses appropriate non-verbal communication skills				
PB, PEOP	Uses verbal communication skills that are appropriate to the setting/client/family				
PB	Written communication: relevant, understandable, legible, concise, organized, correct grammar, spelling				
PB	Can adapt and cope with change: time schedule, demands of setting, assignments				
PB	Modifies performance after constructive feedback: attentive listening, appropriate change in behavior				
PB, CR, EB	Asks appropriate questions, initiates discussion and shares pertinent information with supervisor				

Please provide comments for "Needs Improvement" and "Unsatisfactory Performance" on back of form.



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Scoring of “Needs Improvement” and “Unsatisfactory Performance” should be identified through examples.

Area for Improvement: _____
Example: _____

Area for Improvement: _____
Example: _____

Area for Improvement: _____
Example: _____

Area for Improvement: _____
Example: _____

Area for Improvement: _____
Example: _____
