



***Faculty of Health Sciences  
and Medicine***

**Master of  
Occupational  
Therapy**

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**Practice Educator  
Manual**

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## 1. Abbreviations:

- Faculty of Health Sciences and Medicine: Faculty
- Master of Occupational Therapy: MOccThy
- Master of Occupational Therapy Program: Program
- Master of Occupational Therapy Program Students: Students
- Master of Occupational Therapy Program Charter: Charter
- Practice Education Learning Agreement Template: Learning agreement template
- Practice Education Log: Log of hours
- Student Practice Evaluation Form – Revised: SPEF-R
- The Australian Health Practitioner Regulation Agency: (AHPRA)
- World Federation of Occupational Therapists: WFOT

## 2. Practice Education within the Program

In accordance with the requirements of the Occupational Therapy Council (OTC) and the World Federation of Occupational Therapists (WFOT), the Program includes over 1000 hours of practice education to exceed minimum requirements and to provide students with opportunities to translate theory into practice and consolidate their clinical skills.

Practice education is spread throughout the program, from the first semester to the last. The placement requirements are graded to allow students to develop and consolidate their skills. Prior to attending block placements students will have developed a range of practice skills through placement integrated into university courses. An overview of fieldwork by semester is provided below in table 1.

Semester	Practice education
1	Students take part in 2 days of placement with an occupational therapist to experience the typical day and practice of an occupational therapist. As part of their developing skill as an occupational therapy student, they will also complete an accessibility audit of a public location under the direction of an academic. Students also engage in case studies where they explore the multidisciplinary management of various health conditions.
2	In this semester students explore the importance of occupation for health, and develop foundation skills for occupational therapy practice. Fieldwork incorporates a combination of experiential learning, simulated patients and case studies that simulate real life situations.
3	In semester three students apply in-class learning through fieldwork in schools, workplace health, and community health. They will have assessed and developed a resource box for a child, conducted a job task analysis and ergonomic report (as well as other activities) for a workplace, and run a group education session for members of

	the publics (e.g., equipment and strategies for managing arthritis around the home). This is the semester where student undertake their first block placement of 15 days duration.
4	In this semester students undertake a second block placement of 7 weeks duration. At the end of this semester they will undertake a short overseas placement to consolidate their competency, especially around culturally safe practice. For those who are unable to attend an overseas placement, a series of case studies will be used to replicate the learning.
5	The fifth semester includes the longest block placement of 10 weeks duration. Students should be consolidating their generic occupational therapy skills and knowledge at their stage, although they may be experiencing a new area of practice.
6	In the final semester of the program, students return to the classroom to prepare to transition to practice. In one subject, students undertake a service improvement project through the development of a professional position statement, replicating the professional and service improvement undertaken by occupational therapists in practice. In a second subject, students develop their skills in 'macro' practice (working with communities) by completing an advocacy project.

Table 1: Fieldwork by semester in the MOccThy program

## 6. What should student know by the time they attend placement

While each student will have individual strengths and weaknesses, the program provides a foundation for block placements. The broad structure of the program is provided below 'at a glance' in table 2.

Year, Semester	Subject	Subject	Subject	Subject
1, 1	OCTY71-100 Foundations of occupational therapy	OCTY71-101 Health conditions & multidisciplinary management	OCTY71-102 Neuroscience for health professionals	OCTY71-103 Enabling environments: A systems approach
1, 2	OCTY71-104 Engage: In occupation	OCTY71-105 Enable: Occupational performance	OCTY71-106 Occupational therapy roles & responsibilities	OCTY71-107 Evidence based practice for health professionals
1, 3	OCTY71-108 Occupational therapy: Work	OCTY71-109 Occupational therapy: Learn, play, connect	OCTY71-110 Occupational therapy: Independence & participation	OCTY71-701 Professional practice in occupational therapy I
2, 1	OCTY71-111 The new global occupational therapist	OCTY71-401 Health research design & planning	OCTY71-702 Professional practice in occupational therapy II	

2, 2	OCTY71-402 Health professional research internship A or business elective	OCTY71-703 Professional practice in occupational therapy III		
2, 3	OCTY71-403 Health professional research internship B or OCTY71-404 Capstone research project	OCTY71-114 Management & leadership for health professionals or business elective	OCTY71-112 Promoting the occupational health & wellbeing of communities	OCTY71-113 The occupational therapy professional: Practice, standards & quality

Table 2. Master of Occupational Therapy program at a glance

The following descriptors suggest what you might expect of students at each placement.

Placement	Duration	What to expect
OCTY71-100 Foundations of occupational therapy	2 days	This is the first semester of students' exposure to occupational therapy. By week 7 of semesters that will be aware of selected occupational therapy models (Kawa, PEO, CMOP-E), occupational justice, some childhood and mental health conditions, an introduction to health care systems and accessibility. By week 12, they will also have a basic understanding of occupational science, a wider range of health conditions, and developing skills in cultural competency.
OCTY71-701 Professional practice in occupational therapy I	15 days	Students will have completed at least 2 semesters of study and covered theoretical content including, but not limited to; <ul style="list-style-type: none"> <li>• Understanding health conditions</li> <li>• Working as part of a multidisciplinary team</li> <li>• Health care systems</li> <li>• Cultural competency</li> <li>• Verbal and written communication</li> <li>• Evidence-based practice</li> <li>• Occupation analysis and performance analysis</li> <li>• Basic assessment of environmental and contextual factors</li> <li>• Basic assessment of performance components</li> <li>• Behavioural change</li> <li>• Group processes</li> <li>• General intervention approaches (adapting, advocating, collaborating, coaching, environmental modification, client</li> </ul>

		<p>education, splinting, oedema and scar management)</p> <ul style="list-style-type: none"> <li>• Introductory sessions to common areas of practice (paediatrics, work rehabilitation, chronic disease, hospital, community, disability, aged care)</li> </ul> <p>They should be able to perform a range of tasks with close supervision including broad initial interviews with clients, manual handling, documentation, liaising with stakeholders, applying evidence-based practice and shared decision-making, and applying a basic range of assessment and interventions.</p>
OCTY71-702 Professional practice in occupational therapy II	7 weeks	<p>Students will have a broad theoretical background in occupational therapy and have experienced a range of embedded placements. They will still be in the process of developing their ability to apply skills. They will have some, but limited, exposure to working at a community or societal level.</p>
OCTY71-703 Professional practice in occupational therapy III	10 weeks	<p>In their final placement, students will have a similar range of skills and knowledge to those in OCTY71-702, but should be in the stage of consolidation rather than development. Students may continue to develop new skills, especially if their placement area of practice is new.</p>

### 3. Before the placement begins

Students will be prepared through university content, previous placement experiences, pre-briefing for placement and fulfilment of professional responsibilities. Also students must have a current and valid Blue Card, Federal Police Check (within the last 3 months), hepatitis B and other mandatory vaccinations, and current Provide First Aid (HLTAID003) & Provide CPR (HLTAID001) accreditation.

The student will contact you prior to the beginning of the placement to introduce themselves and ascertain details such as locations, hours of attendance, uniform requirements, parking and other site-specific requirements. If there are specific pre-orientation requirements for your particular workplace (e.g., Queensland Health online modules), this is an appropriate time to direct students to complete these requirements. You may also chose to set pre-reading, which may typically be a small number of journal articles, reviewing relevant websites, or perusing relevant Standards or Acts. It would be reasonable to expect students to complete up to 8 hours of preparation (excluding OCTY71-100

placements) although some practice educators may choose not to set pre-readings.

Students may also benefit from an orientation manual. An orientation manual is a collection of resources that helps to orientate students to the purpose, practices and processes of your service.

Examples of items that might be included in an orientation manual include;

- A service brochure
- Strategic plan or description of how the service fits in the organisation
- Workplace instructions (e.g., home visiting procedures)
- Commonly used forms (e.g., initial assessments, consent forms)
- A map of the facility including parking or other forms of transport, toilets and eating areas
- Information about other services you work closely with (e.g., Home Assist, volunteer services)
- A list of skills and knowledge they are likely to develop on the placement
- Your role descriptions
- Contact details for yourself and other members of staff in case of emergencies (e.g., your team leader)

You may also like to develop your own skills as a supervisor. Bond University, alongside other universities, run regular professional development workshops for practice educators. Please contact Bond University's Academic Coordinator of Clinical Education (Occupational Therapy) for further details. Alternatively, there are free and accessible online training resources to develop your skills as a supervisor including, for example, the Clinical Supervision Support Across Contexts website (<https://clinicalsupervisionsupport.org/login/index.php>) and Enabling Clinical Education Skills website (<http://www.clinedaus.org.au/>).

#### **4. On placement**

Placement can be a daunting experience for both practice educators and students. To encourage a positive experience strategies that can help include;

- Be clear with communication from the beginning. Discuss your expectations, and clarify what the student was expecting from the placement. Discuss how you will provide structured supervision (e.g., short daily catch-ups or formal weekly sessions) in addition to providing regular feedback.
- Provide feedback regularly and as close as possible to the actual event. You may like to give feedback immediately after students take part in a session. One example of a brief feedback structure is 'Keep-Stop-Start' where you identify (or encourage the students to identify) one behaviour to continue, one to stop and a new behaviour that might like to introduce.
- Talk through clinical reasoning. Encourage the students to talk through their clinical

reasoning with you. Model to the student by talking through your clinical reasoning. Be open about what you don't know and what parts of your own reasoning are challenging. Some supervisors use 'talk aloud' reasoning where, with the client's permission, the talk through their reasoning with the student during the session. This can be an empowering and educational experience for students and the client.

- Clarify and negotiate workloads. Even on a final block placement, a student's caseload is likely to be lower than that of a new graduate as they continue to develop and consolidate new skills and acculturate to a new area of practice. On early placements, it might be appropriate for students to time primary responsibility for a limited number of patients (e.g., 6 patients at any one time). The caseload is highly dependent on the context of the placement including depth and frequency of service provision, complexity and amount of follow-up.
- Incorporate the student as part of the team including inviting them to the lunch room and including them in team meetings and discussions.
- Provide opportunities for student autonomy (within the limits of safety). It might take a student's more sessions to achieve the some outcomes with a lower level of supervision, but this is likely to decrease the workload for yourself and improving your student's self-confidence.
- Be aware of your student's and your own emotional wellbeing. Discuss supports and strategies as required.

During the first week, students are likely to be developing their understanding of your service. In many services (depending on the complexity), this week will be primarily work-shadowing with an occupational therapist. You may delegate specific tasks to the student (e.g., problem solving one issue, documentation, completing a single assessment with the client).

In week two, you should have a clearer understanding of the student's learning needs and the students will have a clearer understanding of the service and learning opportunities available. This is an appropriate time for students to set a learning agreement. A learning agreement is negotiated between the student and yourself. It describes the student's learning objectives and how they will achieve them, and should be tailored to their personal learning needs as well as the opportunities provided by the placement. Students will use a Bond University template.

On a regular basis, students should complete the practice education log which documents their placement hours. This will need to be signed by the practice educator on commencement of the placement.

Halfway through the placement, you will evaluate the student's progress and provide feedback (see

section 5 below). The half-way evaluation is formative. The final evaluation, typically completed on the last or second last day, is summative and will decide overall whether the student passes or fails the placement.

Throughout the placement, you should contact the Academic Coordinator of Clinical Education (Occupational Therapy) in any of the following circumstances;

- If you or the student is unwell or has a change in health or personal circumstances (e.g., death of a family member) where alternative supervision arrangement or a rescheduling of a placement day may be required.
- In the case of an accident, injury, or other relevant incident involving the student during placement. The student will need to complete university forms as well as the forms and processes applicable in your workplace.
- If the student's behaviour does not meet the standards of professionalism or safety expected from an occupational therapy student.
- If a student is having difficulty achieving the competencies required during the placement.

## **5. How will I assess the students?**

As there should be regular feedback and supervision, there should be no surprises at the halfway and final assessments. Your halfway assessment is formative only and does not impact the student's final grade. It provides an opportunity for yourself and your student to identify areas of strength and areas for improvement.

Bond University uses the Student Practice Evaluation Form – Revised (SPEF-R) in all three block placements. The SPEF-R is a standardised assessment tool that is currently used across Australia universities. For the 2 day exposure placements as part of OCTY71-100, the SPEF-R is not used (see further details below).

The SPEF-R assesses a student's performance across a range of domains including;

- Professional Behaviour
- Self Management Skills
- Co-worker Communication
- Communication Skills
- Documentation
- Information Gathering
- Service Provision
- Service Evaluation

The SPEF-R uses a five point rating scale. A score of 3 (Performs Adequately) demonstrates that you believe the student is competent to practice at their current level of training. This should be in the context of the theoretical background that the student has at their point in the program, as well as the number and range of opportunities students have had to practice that skill in a graded context during the placement. You are encouraged to include comments to support the scores or provide overall feedback, although with some arrangements supervision may be regular enough that students are already aware of relevant feedback. The overall grade for block placement subjects will be either pass or fail.

You will be provided with an electronic copy of the SPEF-R prior to commencement of the placement. You may choose to use the online version of the SPEF-R or a printed hard-copy version.

For students on a 2-day exposure placement as part of OCTY71-100, you will be provided with a very brief assessment to be completed on each day of the placement (which should take no more than 5 minutes to complete with the student). Similar to the processes above, the halfway assessment at the end of day 1 is formative and will not count towards the student's final grade, whilst the final assessment at the end of day 2 will be either pass or fail.

## 7. Supervision & student placement models

Supervision is an integral aspect of practice education. Supervision provides an opportunity for you and your student to reflect on their learning opportunities and performance, provide feedback or focussed guidance on how the student can to continue to develop their skills, and to establish learning goals and opportunities for the future. Supervision can be both formal (e.g., where you set aside a focussed session of up to 1 hour to discuss with your student) or informal (e.g., discussing with your student after a session with a client, in a car between visits, or answering/asking questions while working on tasks).

A useful structure for setting a supervision agenda might be to include the following headings;

- Clinical (e.g., talking through clinical reasoning, provide focussed education)
- Administrative (e.g., negotiating and allocating caseloads or tasks)
- Emotional (e.g., stress management, debriefing after challenging events)
- Developmental (e.g., progress with learning goals, reflections on the placement, future career aims)

There are multiple models of student supervision and student placements. Some of the common models are described below, although this list is by no means exhaustive.

Supervision /	Description
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Placement Model	
One-on-one	One-on-one supervision is the style of supervision that students are usually most familiar with. With one-on-one supervision there is one student and one practice educator. Having a good relationship with your student is very important in a one-on-one model. While this is a traditional model of supervision, one of the drawbacks of the approach is that the caseload may be complex and close supervision can limit your student's ability to be autonomous and develop confidence with acting independently (with oversight).
Collaborative	This is also known as a one-to-many model of supervision. With this model there will multiple students to one practice educator. It is common for there to be one practice educator and two students. While students are likely to receive less individual attention from you using this model, they are likely to receive useful feedback and support from their peer. Many students find that this model allows them to balance independence with the support and confidence of having a peer to work alongside. Working alongside another student can also normalise the expectations of student performance.
Group supervision	Group supervision can take many forms (e.g., multiple mentoring, shared supervision, inter-agency placements) where there are multiple practice educators and one or more students. These placements work well when practice educators and students have similar expectations and understanding of the practice placement. While having multiple supervisors means that students will have to adapt to multiple styles, they are also likely to benefit from a broader range of experience and skills to draw on and a higher likelihood of finding a supervisory style that works for them.
Role emerging	During role emerging placements, students are placed in a service where there has previously been no or limited occupational therapy involvement. Supervision would occur from a workplace supervisor who may not be an occupational therapist, along-side a supervisor from the university who is an occupational therapist. The university supervisor may, or may not, be onsite. This is typically called 'long-arm' supervision, where the student will meet with the practice educator multiple times per week. Many students find that the responsibility and autonomy associated with a role-emerging placement make them feel more confident in their skills and abilities, and helps to develop important skills

	<p>such as communication and evidence-based practice at a high level. Conversely, students may feel that they have less opportunity to practice hands-on skills. On balance, it is often useful if students experience a mix of both more traditional, as well as role-emerging or project placements (described below). Role emerging placements can also lead to new occupational therapy roles being formed in services, allowing improved job prospects for graduates.</p>
Project placements	<p>Project placements are similar to role-emerging placement in regards to challenges and benefits, and supervision styles. Supervision may be conducted by a university-based practice educator or a practice-educator from industry. With a project placement, students will usually conduct a discrete project such as developing a training program, or setting up a new service within an existing occupational therapy workplace.</p>
Student-led clinics	<p>Student-led clinics are increasingly used to provide students with sustainable opportunities to develop practice skills and knowledge. In student-led clinics, a practice educator provides supervision (usually in the collaborative or group style described above), but students are usually responsible for running the clinic, seeing all or most clients, and handing over and providing training to subsequent student groups in the clinic. Student led clinics often have a limited scope, to ensure that clients' needs can be met by the students' competencies (under supervision). Student-led clinics can help students feel confident as emerging independent practitioners, especially as they will often see multiple clients with similar needs. Having a mix of student-led clinical placements and other placement styles can help students to develop a broader range of skills.</p>

## 8. If problems arise

Practice placement is challenging for most students. They are expected to be learning and consolidating new skills and abilities on a daily basis. Some students can also find it challenging to translate theory learnt in the classroom to the practice setting.

If your student is experiencing difficulty achieving competency in an area, it is important that you communicate your feedback as soon as possible with the student, and if the difficulty continues it is appropriate to contact the Academic Coordinator of Clinical Education (Occupational Therapy) as early as possible.

The Academic Coordinator of Clinical Education (Occupational Therapy) is also a key contact if concerns arise during placement including, but not limited to;

- Lack of engagement: for example, a student does not prepare or actively participate in supervision sessions.
- Lack of professionalism: for example if a student turn up in an inappropriate standard of dress after being provided with previous feedback.
- Concerns around a student's health: students are encouraged to disclose their health needs with you in order to provide reasonable accommodation. If you have concerns about your student's health that may impact on their ability to provide safe client care or complete the placement, it is important to contact the university as soon as possible.
- A change in your circumstances the change your capacity to provide supervision: for example if your service undergoes and unexpected and prolonged reform where there is limited or no contact with clients for an extended period of time. Alternatively, it is not uncommon for a practice educator to have life circumstances (e.g., getting a new job) that requires a reallocation of student supervision.

## **9. Insurance**

The university hold an appropriate level of public and product liability insurance to meet the requirements for registration of occupational therapy students. If you require a copy of the certificate of currency or other insurance document please contact the Academic Coordinator of Clinical Education (Occupational Therapy) who will arrange the latest documentation.

## **10. For further information**

For information specific to practice education at Bond University please contact the Academic Coordinator of Clinical Education (Occupational Therapy).