One Solution to Fieldwork Placement Shortages: Faculty Facilitated Clinics with a Group Supervision Model

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Western Michigan University

Two Campuses
Kalamazoo and Grand Rapids
ONE TEAM – ONE PROGRAM

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Level I Fieldwork: Faculty Facilitated Clinics, 192 Level I Fieldwork placements a year

Level II Fieldwork:
360 Level II Fieldwork placements a year:
Jan-June: 40 Placements
July – December: 320 Placements
Session Objectives

1. Understand the resources needed to establish a faculty facilitated clinic with real clients for a level I fieldwork experience.

2. Identify ways faculty members can meet ACOTE standard C.1.8 to ensure that level I fieldwork includes experiences designed to enrich didactic coursework.

3. Identify orientation material and intentional learning experiences for structuring a group supervision model (1 faculty member: 8 students) for a level I fieldwork experience.

C.1.9. Level I Experiences

Document that a maximum minimum of 80 hours of Level I fieldwork experiences are provided to students, and are not substituted for any part of the Level II fieldwork experience. Ensure that Level I fieldwork experiences enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process, and includes mechanisms for formal evaluation of student performance.
C.1.9. Level I Experiences Continued...
The Level I experience must be met through a combination of the following instructional methods:

• Simulation
• Standardized patients
• Faculty practice
• Faculty-led site visits
• Consumer instruction
• Supervision by a fieldwork educator in a practice environment

Total Level I Fieldwork Placements for 2017

Total Level II Fieldwork Placements for 2017
Challenge:
Not Enough Fieldwork Placements!!!!

Fieldwork (Experiential Learning) Ad Hoc Committee Report
and Recommendations to the AOTA Board of Directors

- New models of experiential education within the academic program:
  - Increase the amount of faculty-led practice experiences
- Objectives:
  - Transition the student to practitioner
  - Ensure translation of knowledge, skills, and attitudes in the application of purposeful occupation-based interventions

Clinic Development
Starting Point

Academic Program
Curriculum
- ACOTE Standard C.1.1
- Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design in collaboration with faculty so that fieldwork experiences strengthen the ties between didactic and fieldwork education.

Curricular Threads
- ACOTE Standard C.1.8 - Level Fieldwork
- Ensure that Level I fieldwork is integral to the program’s curriculum design and include experiences designed to enrich didactic coursework through directed observation and participation in selected aspects of the occupational therapy process.

WMU Level I Fieldwork = Hands-on Practice!

C.1.8.: “Participation”
OT 4750 and OT 4820
- 2 Level I FW experiences
- 90-100 hours per semester
- Evaluation, intervention, and documentation experience.

Level I Fieldwork Educators

ACOTE Standard C.1.8.
- Ensure that qualified personnel supervise Level I fieldwork. Examples may include, but are not limited to, currently licensed or otherwise regulated occupational therapists and occupational therapy assistants, psychologist, etc.

WMU Level I FW Educators
- Occupational Therapists
- Full time or part-time WMU faculty members
- Current Michigan OT License
- On site at all times with students.
Clinic Models

- **Auxiliary Enterprise of the University**
- **Collaboration with an Existing Community Program**
- **Interprofessional Collaboration with Another University’s Established Clinic**
- **Departmental Clinic**

**Auxiliary Enterprise of the University**

- **Unified Clinics** – Kalamazoo, MI
- Multi-specialty clinics in one building
- Student learning opportunities through direct services for community members, under the supervision of WMU faculty members

**Auxiliary Enterprise of the University**

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<tr>
<th>Pros</th>
<th>Cons</th>
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<tr>
<td>Logistics</td>
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Unified Clinics
Kalamazoo, MI

- Pediatric Clinic
- Skills for Living Clinic
- Finicky Feeders Clinic
- Adult Clinic
- Work to Work Clinic
- Child Trauma Assessment Center

Collaboration with an Existing Community Program

Add OT services to an established community service program at minimal to no cost

Community Program Clinics

Kalamazoo, MI
- Kalamazoo Psychiatric Hospital
- School System Literacy Program: SOAR Clinic

Grand Rapids, MI
- Region 1 Transition Services
- Mel Trotter Ministries Homeless Shelter
Collaboration with an Existing Community Program

**Pros**
- Space is Client-Centered
- EMR
- IPE
- Research Opportunities
- Generates Revenue

**Cons**
- Space
- No EMR
- Conflicting Schedules
- Transporting Materials
- Internet
- Financial: Start Up & Maintenance

Departmental Clinic

**Pros**
- CFIT Credit
- Teaching Logistics
- Facility Seen as Clinician
- Departmental Rent
- Multipurpose Space
- Lab & Clinic
- Adult Patients
- Walk-ins
- Client Donations
- Access to Facility

**Cons**
- No Fee
- Access to Facility
- Urban Setting
- Parking
- Client Drop Off
- Schedule: Only Open Fall & Summer Terms
- Inconsistent Census
- No EMR
Interprofessional Collaboration with Another University’s Established Clinic

Pros
• Design Teaching Clinic
• IPE: consultation and co-treatment
• No Operation Cost
• Video Technology
• EMR
• Research
• Peer Learning

Cons
• Academic Calendar
• Travel Time
• Transporting Materials
• Space
• Client Recruitment
• May not be revenue generating
Ideal Model: Departmental Clinic

- Control of operations
- Cost-effective
- Easy logistics

Key Factors for a Sustainable Clinic Model

- Funding: Supplies and Equipment
- Faculty Fieldwork Educator = Workload Credit
- Billing for Services?
- Scheduling System and Maintaining Census

Clinic Treatment Model

Where:
- On campus?
- Within the department?
- Community site?

What:
- How much room do you need?
- Do you need private/quiet space?

Cost:
- Equipment needs?
- Support staff needs?
- Technology needs
Faculty Fieldwork Educator = Workload Credit

- Level I Fieldwork: 4 credit course
- 8 hours on-site teaching

WMU OT Faculty Titles

- Faculty Clinical Specialist workload credit is 150/semester
- Traditional track workload credit is 90/semester
- Research required

Outside of Clinic Faculty Duties

- Facilitating session planning
- Reviewing treatment plans & documentation
- Evaluating student performance
- Conflict resolution
- Ordering supplies & equipment, maintaining inventory.
- Scheduling patients
- Marketing to referral sources
- Cleaning of clinic
ACOTE standard C.1.8 & C.1.9

- Enrich didactic coursework
  - Classrooms come to life
  - Faculty ARE clinicians
  - Clinic clients are guest speakers
  - IPE opportunities

Scheduling System and Maintaining Census

- Paid scheduler vs. faculty management
- Marketing: website, social media, material development (brochures), word of mouth
- Limited by academic calendar

Funding: Supplies and Equipment

- Course fees for students
- Donation-based
Billing for Services?

- Free services
- Donation-based
- Fee for service:
  - Semester fee: $80 eval, $200 flat fee bx per semester

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Additional Clinic
Financial Support

**Work to Work Clinic**
- Michigan Rehabilitation Services
  - Information to help with case management decisions and plan for necessary accommodations
- Van Buren ISD (ages 21 – 26th birthday)

**Pediatric Clinic**
- KG Bound Program: Developmental Enrichment
  - Kindergarten preparatory program for children 35 years

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Liability Insurance

**Student Affiliation Agreements** are in place between the Board of Trustees of Western Michigan University and our community partners.

- WMU insurance coverage amounts are outlined in each contract.
- WMU’s Professional Liability Insurance Certificate covers:
  - A faculty member working as a therapist within the scope of their employment.
  - A student completing a fieldwork placement as part of their academic program.
- Medical malpractice, professional liability and incidental medical malpractice insurance.
- [http://www.wmich.edu/business-services/Insurance](http://www.wmich.edu/business-services/Insurance)
Collaborative Supervision Models

Important Elements for a Collaborative Fieldwork Model

- Positive Interdependence
- Individual and Group Accountability
- Group Interactions
- Interpersonal and Teamwork Skills
- Group Processing

(Johnson & Johnson, 1990)
(Hanson & Deluca, 2015)

Group Supervision Models

1 Faculty Fieldwork Educator: 8 Students
Students work in pairs with one client at a time

1 Faculty Fieldwork Educator: 6 Students
Students work 1:1 with a client during group therapy
Multiple Mentorship Supervision Model

2 Faculty Fieldwork Educators:
2 Students

2 Students
1 Client
2 FWEds
One practice area

2 students
1 client
2 FWEds
Two practice areas

Learning Activities: Group Supervision

- What is involved in orientation?
- How do you give feedback on SOAP notes?
- How do you manage treatment plans and provide feedback?
- Intentional Learning Experiences
  - EBP
  - Video Reflection
  - Daily Treatment Plans
  - Structured Peer Feedback
  - Opportunity to treat alone after midterm
  - OT/OTA

Fieldwork Educator Perspective on Group Supervision Model
Level I Fieldwork Student Survey:

Benefits of Group Supervision

Challenges of Group Supervision

Level I Fieldwork Evaluation

Philadelphia Region Fieldwork Consortium Level I Fieldwork Student Evaluation 2nd Edition

vs.

AOTA Level I Fieldwork Competency Evaluation for OT and OTA Students

- Goal Attainment Scaling (GAS)
  - Student personal performance goal
  - Client-focused goal

- Informal: peer feedback and daily FWEd feedback as needed

- Formal: individual midterm and final meetings
Lessons Learned

- Why clinics close
- Benefits of peer learning
- Serve the underserved
- Quick start up is possible
- Creative scheduling with community partners for clients with high deductibles and limited visits
- Networking
- Productivity benefits of student help
- Client investment in student growth

Future Directions and Questions

References - 1

- American Occupational Therapy Association (2017). Level Fieldwork Competency Evaluation for the OT and OTA Students
References - II


References - III

