



UCC

Coláiste na hOllscoile Corcaigh, Éire
University College Cork, Ireland

Occupational Therapy

Practice Education

OT3007

MODULE HANDBOOK

Year Three

2024/2025

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14th Edition

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Foreword

Dear Students, Practice Educators and Practice Tutors,

Practice learning is at the heart of the UCC occupational therapy degree programme. It is delivered through a partnership between the University, Health Service Executive, and voluntary and private sector providers. The extent of this partnership approach to teaching distinguishes practice modules from the other modules within the programme. Practice education modules facilitate a reciprocal relationship of theory influencing practice and practice influencing theory, which is essential for the development of our profession.

Welcome to module OT3007 and for this cohort, their second major block of practice education. This is an important occasion as you move into the *Transition* stage of your learning development. Within this practice you will draw upon and begin to apply your learning from year one and year two. The overall aim of this practice is on development of professional behaviour, clinical skills and competencies, continued personal development and commitment to the profession in order to transition from a student to a practitioner. Module OT3007 is weighted at 10 credits and contributes one third of the marks for fourth year. All UCC modules must adhere to the National University of Ireland (NUI) Grade Descriptors (see module documents).

The role of the Practice Tutor is central in the delivery and development of practice education. The UCC Practice Tutors will provide support to both educators and students during this practice. Please seek their advice and assistance. Students will meet members of the Practice Tutor team during the **“Linking learning – preparation for practice”** session. This is a good opportunity to ask any questions and discuss/agree on how you will work with your Practice Tutor. Our Practice Tutors have a wealth of knowledge and experience and I know you will find it a pleasure to work with them.

A module evaluation may be completed by any stakeholder involved in module OT3007. Students are requested to complete a module evaluation upon completion of linking learning.

Wishing you all the best for this practice placement,

Practice Education Coordinator (PEC)

Being Supported and Contacting People

This handbook is written for UCC students, Practice Educators and Practice Tutors.

UCC Students

Welcome to module OT3007 and the third block of practice education. Allocations will be released via email, and you will be assigned a Practice Tutor (PT) to support you throughout the practice education placement. Your tutor will provide you with a site profile and highlight what reading you might like to revise. We encourage students to disclose any new or relevant information to the Practice Education Coordinator (PEC) in advance of allocations being released. Please contact your assigned PT with your completed Letter of Introduction and CV. Your tutor will also answer any questions that you may have relating to the practice setting and furnish you with a site profile.

Support

You will have a named Practice Educator (PE) and PT to support you throughout the practice education placement. Your PE is your primary educator and will give you informal feedback on your practice. Your PE will also meet you for one-hour weekly formal supervision at scheduled times – as recommended by AOTI. The time for this supervision should be established during your first two weeks of practice. Your PT will provide additional support and tutorials as required. Students are encouraged to disclose their learning needs and/or disability to the PEC so that a 'reasonable adjustment plan' can be created and sent to the PE.

Practice Educators/Practice Tutors

Thank you for agreeing to facilitate our students with this final practice. We hope you find this handbook informative; its purpose is to provide you with the information necessary to manage this placement. The Practice Education Team and Head of Department will do all they can to help you should any matter arise. The PT role involves supporting both educators and students. Practice education full day workshops are held before each academic year. Additional briefings and webinars are also held throughout the academic year. If you are interested in attending, please contact a member of our team.

PTs will liaise with the PEC in relation to the progress and development of the practice. A briefing and review meeting will be convened before and after each practice education placement.

Additional Contacts

The department administrator Garry O'Sullivan on garryosullivan@ucc.ie. The Head of Department Margaret McGrath can be contacted on margaret.mcgrath@ucc.ie if the PEC is unavailable. At the end of practice placement, we would appreciate if you could complete our module evaluation questionnaire. Your feedback is essential and will facilitate the continued development of this module and practice education at UCC.

Contact Details for the Practice Education Team

UCC Contact Details	
Practice Education Coordinator, UCC	Jean Harrington Jeanharrington@ucc.ie 087-279-3722
Executive Assistant, UCC	Garry O'Sullivan garryosullivan@ucc.ie
Year 4 Coordinator	TBC
Head of Department, UCC	Margaret McGrath Margaret.mcgrath@ucc.ie

UCC Practice Tutors in HSE South	
Cork: Mental Health	Shelley Mack (087) 7871133 Shelley.mack@ucc.ie
Cork: Adult Community Services	TBC
Cork: Paediatrics, West Cork, Kerry & Erasmus	John Hastings (087) 915 7038 j.hastings@ucc.ie
Waterford: Acute & Community	Annmarie Norris (087) 648 4569 Annmarie.norris@hse.ie
Cork: Acute Services	Miriam O'Tuathaigh (087) 7872215 Miriam.otuathaigh@hse.ie
Carlow, Kilkenny and South Tipperary	Caroline Booth (087) 191 3978 Caroline.booth@ucc.ie
Wexford	UCC Practice Education Team

Module Description OT3007: Practice Education III

Credit Weighting: 10. *The notional student workload for 5 credits is 125 hours*

Semester(s): Semester 2 (September – May)

No. of Students: Min – none specified, Max – 30

Pre-requisite(s): None

Co-requisite(s): None

Teaching Method(s): x1 10week(s) Placement

Module Coordinator: Ms Emer Fenlon – School of Clinical Therapies

Lecture(s): UCC OT Practice Tutors – HSE; Staff of School of Clinical Therapies – UCC

Guest Lecture(s): UCC OT Practice Tutors – HSE; Staff of School of Clinical Therapies – UCC

Module Objective: To develop the knowledge, skills and professional attitudes in the design and implementation of Occupational Therapy programmes in the Adult/Older Adult groups facilitated by an Occupational Therapist (physical or psychosocial).

Module Content: This module will focus on a deeper integrative understanding of occupation, occupational performance and occupational adaptation as they relate to adults or older people, processes in Occupational Therapy practice, interactive skills, critical observation, appropriate ability to gather information for analysis and interpretation or client-centred practice requirements.

Learning Outcomes:

On successful completion of this module students should be able to:

1. Manage a partial caseload undertaking all duties associated with patient management through coaching by practice educator.
2. Select and utilise appropriate assessment and treatment tools under supervision of and collaboration with practice education.
3. Describe processes involved in clinical reasoning that supports treatment plans.
4. Analyse the use of occupation as a basic therapeutic tool to respond sensitively to the needs of patients who are experiencing developmental, physical, psychosocial and/or environmental barriers preventing healthy and meaningful lives, with coaching from the practice educator.
5. Promote the quality of meaningful occupations in the lives of patients with physical or psychosocial conditions and their family members.
6. Demonstrate in-depth research skills to support the presentation of a case study.

7. Demonstrate reflective skills-on-action with coaching from the practice educator.
8. Communicate with patients, family members and colleagues in an appropriate and professional manner.

Examination and Assessment: Total Marks 200. Practical Exam - Clinical Assessment 200 marks. Completion of required Competency Based Fieldwork Evaluation Continuous Assessment – 200 marks. Attendance in clinical practice education as scheduled in the programme (pass/fail) & completion of hours logbook (pass/fail). (200 Marks)

Penalties (For late submission of Course/Project Work etc.): Work which is submitted late shall be assigned a mark of zero (or Fail Judgement in the case of Pass/Fail modules).

Pass Standard: 50%

Special Requirements for Passing Module: Achievement of clinical competencies as specified in the Competency Based Fieldwork Evaluation (CBFE) signed & dated by both the student and the practice educator. Students must pass each of the 7 competencies of the CBFE independently. Submissions of completed CBFE & signed Hours Logbook. Students must attend all scheduled teaching & clinical placement activities. Students must provide a satisfactory explanation, supported with evidence for all absences. For students who do not satisfy all requirements, the overall mark achieved in the module & a 'Fail Special Requirement' will be recorded. Pass by compensation does not apply to this module.

Supplemental Examination and Assessment: Continuous Assessment – Marks in passed elements of continuous assessment are carried forward. Failed elements must be repeated. Students who fail to achieve a clinical competence by the end of clinical practice placement will be required to pass a repeat clinical practice placement as prescribed by the Department of Occupational Science & Occupational Therapy. In addition, failure to attend a 'repeat time' as prescribed/scheduled by the school will result in a Fail judgement and students will be required to repeat the module in a repeat year. In addition, students will be allowed only one repeat year of this module.

Roles and Responsibilities

Practice Educator (PE):

- Plans and designs the practice with their PT.
- Liaises with the PT to develop the practice placement for the student allocated to the PE.
- Teaches and provides direct learning support for the duration of the practice.
- Provides weekly formal supervision. The overall purpose of Professional Supervision is to monitor and maintain professional competence while supporting ongoing learning and growth within the scope of professional practice.
- Assesses the student's learning at midway and provides feedback at the end of the practice.
- The PEs will be responsible for facilitating the students' knowledge and providing learning opportunities.
- The PEs will be responsible for assessing the students' learning and performance. If you become unavailable for any reason during this practice, please discuss this with your PT.

Practice Tutor (PT)

- Sources and coordinates practice education over an area of remit in liaison with managers and therapists.
- Liaises regionally with the PEC and other PTs to develop practice education.
- Designs induction and orientation programmes with PEs. See [student induction checklist](#) for a list of potential induction processes).
- Facilitates pre-practice workshops, briefings and webinars for PEs.
- Teaches and provides direct learning support to students and PEs.
- Provides a minimum of two tutorials to students whilst on placement to support their learning.
- Supports the assessment process and contributes to consistency of assessment across the whole class.
- Attends Learning Review with each of their students.

The Practice Education Coordinator (PEC)

- Coordinates practice education for the OSOT BSc programme in UCC.
- Has lead responsibility for the allocation of practice education placements to a practice site/PT area of remit.
- Plans, organises, and develops systems of management.
- Has a quality improvement role in practice education.
- Provides the documentation for reaccreditation of practice education.

- Plans, organises, and develops educational courses for PEs who facilitate students.
- Visits practice locations with/without the PT for the area.
- Teaches and provides learning support and facilitates assessment.
- Statistical collection.
- Student induction and orientation onto the programme.
- Ensure students are prepared for practice.
- Conducts/facilitates learning reviews with each student on completion of placement.
- Ensures all documentation/assessments are ratified by exam board and external examiner.
- Liaises nationally with others in similar positions to develop a regional student exchange mechanism and national approach to practice education.
- Liaises with academic staff of the OSOT BSc programme in UCC.

Information for Students & Practice Educators

This practice education will be 10 weeks in length. The focus of this practice education is to put into practice what students have studied in the PEO 3 and PEO 2 modules. This is quite an important occasion as you are now at the Transition stage of your learning development. The emphasis during this developmental stage is on practice and experience in problem-solving, assessment, and intervention. Students begin to share and assume responsibility for all components of practice. Students should be encouraged to try to develop their own ideas and insights regarding clients, engage in discussion of solutions to clinical problems, and begin to make decisions about the most viable course of action.

Teaching Style

The teaching style for the first half of this practice will be Directive and then shift to Coaching.

Directive: As students move through the curriculum and gain experience in the clinical environment, they learn the principles practice and become familiar with the role of an OT. During this stage of development, students need to observe, practice skills, and reflect on their performance. Providing direct evaluation and feedback is useful to students with little or no experience or for students who are inexperienced in a specific area of practice (Anderson, 1988). Students need an opportunity to take an active role working with clients to apply their knowledge and to develop and practice interaction, assessment, intervention and professional reasoning skills. They are becoming familiar with the roles of the therapist (Bossers, et al., 2007).

Coaching: At the second half of this practice placement, the students transition between knowledge application and consolidation. Although students at this stage interact with the PE to varying degrees to solve problems and make decisions, they can make meaningful contributions as members of the team. Students begin to share and assume responsibility for all components of practice. Students should be encouraged to try and develop their own ideas and insights regarding clients, engage in discussion of solutions to clinical problems and begin to make decisions about the most viable course of action. Students should be encouraged to engage in self-analysis and reflection and to share and integrate previous learning experiences into their practice (Bossers et al., 2007). The Coaching Supervision Strategy (Hagler & McFarlane, 1991) is appropriate for students in the process of developing autonomy and independence. A coach is a highly supportive role model who intercedes in difficult situations to collaboratively solve problems while gradually increasing a student's responsibility for professional decision-making.

Placements in UCC

Practice Placements are arranged to ensure that you all have adequate exposure to key aspects of practice that follow the theoretical and experiential parts of the course.

Allocations will be made with the overall needs of the group in mind. Students will receive a link to an online 'Considerations Form' to complete prior to placement. For the allocation process, all received consideration forms are taken into account. We will endeavour where possible to place students in one of their preferred counties of convenience at least once throughout the program. We encourage students to disclose any new or relevant information in advance of allocations being released.

Where there is a failed placement and the student is permitted to repeat, a placement will be sourced in the same type of clinical practice, however this may not always be possible.

Year 1 – A 2-week (70 hrs) placement will take place at the end of Semester 2. This practice gives you the opportunity to develop your professional behaviour in an occupational therapy context. During this practice, your involvement in the occupational therapy process is at an observational level.

Year 2 – An 8-week (280hrs) placement will take place at the start of Semester 2 working with adults/older people/children/young persons in either a physical or psychosocial setting.

Year 3 – A 10-week (350hrs) placement will take place at the start of Semester 2, working with adults/older people/children/young persons in either a physical or psychosocial setting.

Year 4 – A 10-week (350hrs) placement will take place at the start of Semester 1, working with adults/older people/children/young persons in either a physical or psychosocial setting. Students can also opt to complete this practice abroad through our Erasmus programme

Preparation for practice

Students must complete several mandatory tasks prior to going out on practice. These include:

- Garda Vetting
- Vaccinations
- Student Declaration
- HSEland modules
- First Aid
- Patient Moving & Manual Handling
- Pre-Practice Linking Learning workshops
- Contact PT and PE with CV.

Students who do not complete these tasks will not be permitted to attend practice.

Pre & Post Practice Linking Learning Sessions

These sessions take place the week before and the week after each practice placement to prepare, reflect and to make the links between your academic work and practice. **These sessions are mandatory** and will consist of class work, individual study, and small group work. You will be notified of the times and dates on CANVAS.

Please note:

- Non-attendance at a mandatory pre-placement workshop will be analysed on a case-by-case basis.
- The determination of what constitutes a mitigating circumstance is at the discretion of the PEC in consultation with the Head of Department.
- For students who do not attend pre- and post-practice linking learning the following is required– Students must link in with the PTs and the PEC. Work will be assigned based on the content of the linking learning sessions which must be completed in advance of commencing placement.

Garda Vetting

Garda Clearance is carried out by the Admissions Office in UCC once the student has accepted his/her place on the programme. The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 (the Acts) provide a statutory basis for mandatory vetting of persons who wish to undertake a work placement and/or activities that bring them into contact with children and/or vulnerable adults.

In accordance with the Acts, UCC requires students (or prospective students) for relevant programmes to be vetted. Registration on these programmes is provisional, pending the outcome of the Vetting process. All students have cleared the garda vetting process before being allocated to a practice site. Information regarding this can be sought from the UCC admissions office or on the following website:

<http://www.ucc.ie/en/study/undergrad/admissionspolicies/studentvetting>

Student queries relating to Garda clearance may be directed to Garry O'Sullivan at garryosullivan@ucc.ie

Some sites chose to further vet students allocated. This is at the discretion of each placement site. Students need to be aware that failure to engage promptly in this process may hinder their start date for practice. Your PT will supply you with all necessary information. Students are required to confirm Garda Clearance status prior to placement.

Fitness to Practise Policy

All students entering the programme must comply with the Fitness to Practise Policy and meet the Fitness to Practise Standards. Students registering annually are required to read and accept the Fitness to Practise requirements. [Fitness to Practise | University College Cork \(ucc.ie\)](https://ucc.ie/fitness-to-practise)

Reasonable Accommodation

The University is required to provide reasonable accommodation for students with additional needs and/or disabilities to complete placement - Employment Equality Acts (1998-2011), Disability Act (2005), Equal Status Acts (2000-2011), Health Safety and Welfare at Work Act (2005). Reasonable accommodation is any intervention or support which serves to reduce barriers to participation in education/employment for people who are at a disadvantage due to the impact of their additional needs and/or disability.

Prior to allocations, students are encouraged to disclose their additional needs and/or disability so that a 'reasonable adjustment plan' can be created and sent to the PE. Students who choose not to disclose do so in the knowledge that they may be at risk of failure as accommodation will not be in place. This is highlighted to students at Y1 orientation, and they are reminded again at pre-practice linking learning sessions. Please contact Disability Support Services for more information: [Access UCC | Supports for students with disabilities available from disability support | DARE | University College Cork](https://ucc.ie/disability-support)

Health Matters

As a student of the faculty of Medicine and Health, you should protect yourself and your clients from contracting and transmitting common infectious illness. Your immunisation status and/or immunity to Hepatitis B, Measles, Mumps, Rubella, Varicella Zoster and Tuberculosis should be on record in the Student Health Department and students must record their immunisation history on their Practice CV. The Student Health Department recommend and provide a programme of vaccinations to students and will make individual recommendations as required. You are strongly advised to follow Student Health's recommendations. [Incoming Healthcare Students | University College Cork \(ucc.ie\)](https://ucc.ie/incoming-healthcare-students). The University also offers counselling services and Disability Support Services to students (<https://www.ucc.ie/en/dss/>).

First Aid & Patients Moving & Manual Handling

A certificate in basic first aid and in patient moving and manual handling is required for practice. **It is the responsibility of each student to complete and pass these certified courses.** The first aid course is organised by the class representatives in Year 1 & 3 and the cost is the responsibility of the individual students. Further information is available on CANVAS or on the Practice Education Notice Board.

The Patient Moving & Manual Handling course is completed in Year 1 and 3, and it is organised and funded by UCC. This training is mandatory for all students to attend. Evidence of attendance must be supplied to the PEC. Failure to complete the training will prevent the student from starting practice.

All students are required to keep a record of their certs in their practice education file/folder and will be required to upload valid certificates in order to attend placement. If either training is not complete, this will prevent you, the student, from starting practice. Please check CANVAS for further information on this training.

HSEland Modules

HSEland is an online training portal providing courses and learning resources for healthcare professionals. Students must set-up an account and complete the following HSEland modules:

- An Introduction to Children First (every 3 years)
- HSE Open Disclosure Modules 1 (every 3 years)
- Dignity at Work (every 3 years)
- HSE Cyber Security Awareness (every year)
- Fundamentals of GDPR (once)
- AMRIC Hand Hygiene (every 2 years)

“An Introduction to Children First” is mandatory for all HSE staff, students and volunteers. Children First National Guidance for the Protection and Welfare of Children (2011) is the National Guidance which promotes the safety and wellbeing of all children. Children First States that “protecting children from harm is everyone’s responsibility”. The HSE has a responsibility under Children First to ensure that all staff members or volunteers are aware of how to recognise signs of child abuse or neglect and how to make a report to the Child and Family Agency (TUSLA).

Note: Students can access all of these modules on www.hseland.ie. Students must ensure certificates are updated when required and uploaded to CANVAS before practice. Each individual setting may require students to complete additional training relevant to that service. PTs will notify students before practice what certificates they will need to complete. Copies of all your training certificates must be kept in your practice portfolio and

note the date of completion in your Practice Education CV. Please see your HSEland account for information on expiration of completed certificates.

Curriculum Vitae/Letter of Introduction

A student's practice education CV should include details of the student's skills, interests, and other relevant information. Year 4 students must send their Curriculum Vitae (CV) & Letter of Introduction (LOI) to their PT within two weeks of receiving their allocation. Upon receipt of the CV and LOI, the PT will send on the site profile. Following on from this, the student will initiate communication with their PE as soon as possible. Failure to do so, will be reflected in the students' CBFE as this is part of the students' professional behaviour and responsibility. A blank Practice CV template is available on CANVAS and students are encouraged to update their Practice CV over the course of the programme.

Dress Code

Each setting will have different rules regarding dress code. **Some sites may require a uniform (site specific)** whereas in some settings smart casual dress is the norm. Students are required to check with their setting before attending practice. Students are expected to dress **professionally** (smart trousers, shirt, jumper) and for ease of movement wear comfortable clothing.

- Jewellery should be kept to a minimum – wearing jewellery is not acceptable in the clinical situation (except for a plain wedding band).
- Long hair should be tied back, and nails kept clean and short.
- Name badges **must** be worn at all times – except out in the community if it is going to draw attention to the client.
- Footwear should be suitable for moving and handling.
- Clothes should be clean and appropriate to the work placement environment.

NOTE: It is the student's responsibility to follow the guidelines and ensure that they are always professionally presented.

Insurance

The University provides insurance cover for students for their practice. This indemnity (available on CANVAS) is conditional on the students' compliance with university requirements and the practice sites' policies. It is the student's responsibility to ensure that they receive guidance and information regarding the policies and procedures (including health and safety policy) of their practice education site.

PEs will state if a car is required for placement, and this is noted in the Site Profile. Students driving their own cars must contact their insurers to see if they have adequate insurance cover.

Summary of Tasks for Students

1. Attend and participate in **all mandatory Pre & Post Practice Linking Learning sessions as well as complete the necessary tasks** that are required for practice placement.
2. **This practice:** of ten weeks (350hrs) will be assessed using a modified Competency Based Fieldwork Evaluation (CBFE): 400 marks (see module documents).
3. **Hours** must be recorded accurately and neatly in the **Hours Logbook Template** (see module documents). This must be signed by the student, PE, and PT. A **copy** should be **retained by the student** in their **Practice Education Portfolio** and a **copy returned to UCC via CANVAS** after the Post Linking Learning session.
4. **Reflective Diary:** A reflective diary should be kept for the duration of your practice. You should discuss some critical incident/key points of learning logged in your diary, within your supervision sessions. Your diary will also be needed in linking learning (see module documents for template).
5. **Activity Analysis Form 4** (see module documents): Students are required to complete at least one occupation-based activity analysis with a client, considering the grading of the activity for that particular client. Students should discuss this analysis with their PE. There will be group work about the activity analysis during the post linking learning sessions.
6. **Case Study Presentation:** Facilitate a presentation of your case study using case conference style (no Powerpoint) to your PE, PT, and other members of the MDT. The case study presentation will comprise of a 20-minute presentation followed by 5-10 minutes of discussion.
7. **Self-appraisal** using the Competency-Based Fieldwork Evaluation before midway and final assessment.
8. A **Thank You Letter** to your PE.
9. Participate in a **learning review** with your PT and the PEC.
10. Complete the online **module evaluation survey** at the end of practice.

Student Behaviour While on Practice

All students must sign a Student Declaration before attending practice placement (see module documents).

This declaration represents the student's commitment to professional behaviour which must be upheld throughout all practice education experiences.

Ethical Behaviour

Students have studied ethics and the Ethical Code from Ireland in their PPD module in first year and second year. As Occupational Therapists we are required to adhere to the AOTI Code of Ethics (2013)

[aoti_code_of_ethics_2013_file_563.pdf](#). Students are advised they may be working with people who are in vulnerable situations. They are advised to be sensitive and empathetic when dealing with people, to try putting themselves in a similar situation (phenomenology) and consider one's use of language (verbal/body language), and thinking about how they act, how they talk e.g. louder, slower. Behaviour that is thoughtless, disrespectful, or careless can harm clients and create a bad impression for the profession. Meticulous care will be taken when discussing clients and clients' names plus significant identifying features must be changed for any educational work so they cannot and must not be identified. This is a legal consideration. It is the student's responsibility to maintain confidential client records. A student may not remove client records from practice settings.

Anti-Discrimination and Multiculturalism

Ireland is a multicultural society. People from many different countries are living and working in Ireland. This includes EU citizens, refugees and asylum seekers, including those from new member states, people who hold work permits and visas and minority ethnic people from within Ireland including Travellers.

The **Employment Equality Act** and the **Equal Status Acts** outlaw discrimination in employment, vocational training, advertising, collective agreements, the provision of goods and services and other opportunities to which the public have access on nine grounds. These are: gender, marital status, family status, age, disability, race, sexual orientation, religious belief, and membership of the Traveller Community. Discrimination is described in the Act as "the treatment of a person in a less favourable way than another person is, has been or would be treated on any of the above grounds" <http://www.equality.ie>. The student needs to be aware of and sensitive to a culturally and linguistic diverse clientele and respond to clients' specific cultural needs. Students should be familiarised with policies and procedures for dealing with issues of discrimination and harassment.

During Practice: Professional Behaviour

- Students must maintain consideration within their workplace.
- Demonstrates operations and organisational awareness.

- Builds collaborative relationships by acting with professional integrity. E.g., always knock on people's doors and wait for permission to gain entry.
- Always enquire **prior** to placement re: dress code, and dress professionally.
- Always respect ethical considerations and anonymity of individuals.
- Always get prior consent from the PE, patient and use consent forms before taking photographs or before talking officially with patients.
- All students on practice are expected to be punctual for practice meetings, home visits and presentations. There must be a **record of absence** for each student. Hours lost must be completed at a future date.
- Gives and receives feedback effectively, seeking assistance when needed and responds positively to constructive feedback.
- Fosters open communication and manages relationships with diplomacy.
- Students are reminded that they are ambassadors for the occupational therapy profession and UCC.

Personal Hygiene

In many practice areas students work closely with people, sometimes handling them physically or leaning over them. Students are advised to ensure that their hygiene is immaculate and that they wash/shower daily and always use deodorant. Sometimes the use of clinical gloves in the workplace may be necessary.

Smoking & Vaping

Students are not permitted to smoke/vape on clinical sites except in designated areas. Students should be aware of the lingering smell of their breath after smoking/vaping. This may cause a vulnerable client to be nauseated or vomit. Strong perfumes can also cause nausea or allergies.

Hand Hygiene Training & Infection Control

Hand hygiene is the single most important intervention to prevent transmission of infection. All students have a responsibility to prevent transmission of infection and to utilise proper hand hygiene.

To ensure that you are “hand hygiene ready” for practice:

- Nails should be kept short and clean.
- Nail varnish is not permitted.
- No fake/false/shellac nails.
- No rings (exception one plain wedding band).
- Sleeves should not come to the wrist.
- No watches/bracelets (nothing that can get in the way of washing hands/wrists).
- Cover cuts with waterproof dressings.

NOTE: Students will be guided by local policies and procedures in relation to PPE requirements for specific placement sites and you must follow the advice provided by your PT/ PE.

Students are required to comply with ‘bare below the elbow/bare above the wrist’ when in clinical areas.

Study Hours

It is acknowledged that study is an important component of practice education. Students in 2nd, 3rd and 4th year are allowed study time per week and students **must negotiate when to take this with their PE and must have an agreed learning outcome relevant to practice.** The outcome of study sessions should be discussed and recorded within supervision. This is the students’ responsibility. These **study hours are taken weekly and should not be accumulated.** The previous minimum standards stipulated a maximum of three study hours per week. **Study hours can only be calculated from time spent on placement-related learning.** Study hours may be taken on-site or off-site.

Mobile Phones and Social Media

It is not acceptable to receive personal phone calls or send texts during practice time, unless otherwise agreed with your PE. However, in certain clinical settings it will be necessary to have one’s phone switched on for safety reasons. Please work with the clinic’s policy on the use of mobile phones in the workplace.

Students are advised to be knowledgeable about their privacy settings on their social media accounts and never post or comment anything about a client or health care setting.

Stress Management

It is recognised that many students may feel anxious prior to or during their practice (Alsop & Ryan, 1996) and some degree of stress is entirely normal. Stress can be related to a new and yet unknown experience, relationships with the PE and other staff at the setting, contact with clients and significant others and assessment procedures. Too much stress can inhibit student learning and the effectiveness of the practice. It is important that stress is recognised and addressed before it leads to burnout. Discuss strategies and supports available with the Practice Tutor when they make contact.

The UCC student counselling service is also available (private, free, and confidential). Please contact them by phone: 021 490 3565 or email: counseling@ucc.ie

Home Visits

First and second year students should always be accompanied on home visits. In third year, each student’s ability to complete an independent home visit should be assessed on an individual basis after week six of practice. In fourth year, students’ ability should be reviewed during week four. It is recommended that a risk assessment is completed prior to each home visit following the policies and procedures of the practice site.

Decisions about home visits should be made based on client status and the safety for the student. Discuss with the PE and/or PT.

In mental health settings, it is noted that in most cases, home visits take place in pairs (an OT and another health professional).

Confidentiality & GDPR

Student assessment and performance will be treated with sensitivity and confidentiality. Similarly, students must treat clients' files with the same respect. PEs may bring a client's file to a home visit but please bear in mind that **under no circumstances** are students permitted to remove a client's records from a practice site. Students **must not** discuss clients outside the workplace. Client/patient names or identifiable information **will not** be discussed in public. The site name will not be used in class discussions. It is important that students take precautionary measures to safeguard patient and client information whilst on practice and in storing research data (see next point on laptop use). Students are required to complete the GDPR HSEland module. Confidentiality breaches will result in a **failed** placement.

Laptop use during practice

You may be advised to use your own laptop for project related/research related activities. Please be advised that laptops CANNOT HAVE ANY PATIENT/CLIENT/SERVICE USER related material on them. Laptops should be used only for project-based work and research and not contain any sensitive information.

No USB keys are to be used. Additionally, it is important to familiarise yourself with the GDPR policy. There may be certain protocols involved in telemedicine/telecare such as the use of secure platforms, client consent, and safeguarding your work in a non-public space. If students are using their own laptop/tablet on placement, they are doing so at their own risk. Students may need to take out additional insurance to cover any damage or loss to their device during placement.

Attendance

Attendance is mandatory for the following:

- Preparation for Pre-Practice Linking Learning Sessions
- Practice education placement: for the duration of the allocated time
- Post-Practice Learning Review (Yr2, Yr3 & Yr4)
- Post-Linking Learning Sessions

Sickness/Absence Policy

Any absences from practice must be recorded in the hours log, e.g., sick leave, certified/uncertified. Practice education is examined on the continuous assessment model. Notwithstanding this we do recognise that on

occasion unforeseen circumstances can affect continuous attendance. **If a student is absent for more than 20% of any one placement, they may be required to make up this time or take the whole module at a later date.** This judgement will be made in consultation with the PE, PT and PEC.

Sickness

- The student **must contact their PE directly by telephone**. It is not acceptable to email, text or to leave a voice message. Students must speak with their PE. **This is mandatory. The student must also inform their PT and the PEC.** This is acceptable by text, email or voice message.
- If it is not possible to telephone the PE, then the student must request the PT to pass on the message on their behalf, however, it is only professional courtesy that the student should make every effort to contact the PE.
- A **medical certificate** must be submitted for **absences of two days or more. This is mandatory.** The medical cert should be sent to the PT and PEC. A copy is scanned to file and the original is sent to the Student Examination and Records.
- Where students are working in HSE facilities they must also adhere to HSE policy and procedure. These procedures will be set out during induction/orientation. If for some reason the policy is not mentioned at this time, it is the responsibility of the student to ensure that they secure this information as soon as possible.
- Sick days must be marked as such in the Hours Logbook.

Absence/Days off during placement

- Students are not allowed to take days off for family gatherings etc. on an ad hoc basis unless it is an emergency such as family illness or bereavement. If a student requires a day (or days) off during practice education placement, this must be agreed between the PEC and student as soon as the need arises.
- If there is a special gathering e.g., family wedding with the date known to the student at the time of the placement allocations, then it may be possible to discuss and negotiate that day off in advance of commencing the placement.
- Where medical appointments were made prior to placement allocations, or an appointment is offered, these appointments may be attended. The student must inform the PE and PT. The student must make arrangements so as to ensure that client and service responsibilities are covered and send evidence of appointment to the PEC.
- The student must inform their PT and their PE of the dates of their intended leave on the first day of practice and indicate that they have discussed this with the PEC. Failure to do so will be deemed unprofessional behaviour.

- The student may be required (where possible during the placement) to make-up time missed. If this is not possible, the student must then discuss future opportunities to make up the time lost with the PEC on their return to university.
- Adequate notice for any absences must be given.

It is **imperative** that each student has accumulated the prerequisite number of hours as set out by WFOT necessary to qualify as an Occupational Therapist. [Publication: Minimum Standards for the Education of... | WFOT](#)

In case of an emergency

If a student does not show up to practice without contacting their PE, contact will be made to the student first. If there is no response from their mobile number, the PE/PT/PEC will contact the next of kin details that was provided to them. In the case of missing students, the UCC Missing students' protocol will be followed.

[ProtocolforRespondingtoMissingStudents.pdf \(ucc.ie\)](#)

Student withdrawal from placement

A student may request withdrawal from placement on the grounds of ill health or personal circumstances e.g., family bereavement. Students can discuss their request for withdrawal from placement with their PT and PEC and/or the Head of Department. Based on the individual circumstances a provisional agreement to withdraw may be put in place. The student will have to complete a deferral request form for this module and send it to the Student Records and Examination Office (SREO). A student who withdraws from placement is not credited with any Practice Education hours for that placement. Students withdrawing on medical grounds will need to provide a **'fitness for placement'** letter from their general practitioner before their repeat placement.

Learning Review Process (Years 2, 3 & 4)

After placement, each student completes and submits their learning review form (see module documents) on CANVAS. A three-way meeting (student, PT & PEC) is scheduled at the end of practice placement. Students should be able to verbalise their personal reflections about their self-directed learning, ideas, and mastery of skills by providing specific examples of how it was demonstrated during practice. The key emphasis of this review is to support the student and assimilate the feedback that have received during practice from a variety of sources.

Professional Suitability and Unsuitability

It is imperative that students behave in a professional manner interacting with members of the public and with professional peers. It is important to maintain a professional image to gain the credibility and confidence of clients.

The following procedures will be followed by the Department of Occupational Science and Occupational Therapy to monitor, and record alleged professional unsuitability of any student on the UCC programme.

Before Practice

The following are some of the UCC regulations:

1. Healthcare students must **complete a TB Screen & Vaccine Data Form** [Incoming Healthcare Students | University College Cork \(ucc.ie\)](https://ucc.ie), and must have received the required vaccinations in year one.
2. Each student is responsible for completing and passing an approved **first aid course**. A copy of the first aid cert should be sent to the PEC and students are required to keep it in their portfolio.
3. All students must **sign a student declaration** annually (see module documents).
4. All students will be required to complete and submit a **Standard Disclosure form for the Garda Vetting e-vetting process**.

During Practice

1. Any student who appears to have developed a health problem during the practice that could affect professional suitability will be required to provide a medical report regarding the fitness (of the individual) to practise and fitness to return to practice.
2. Any concern expressed by PE's or lecturers related to professional unsuitability which may manifest as adverse reactions to clients/situations and may be related to health problems, attitudes or behaviours will be formally investigated by the Head of the Department. Incidents will be recorded and reviewed on a case-by-case basis and may impact the student's progress on placement.

Procedures for dealing with Professional Unsuitability

Concerns about the professional suitability of a student will initially be followed up through the PE/PT/PEC and the Head of Department in that order. Examples of professional unsuitability include:

- Conduct that could bring into disrepute the profession of occupational therapy and its allied professions and/or prejudicial to the best interests of clients or others.
- Breaches of confidentiality.
- Inappropriate emotional involvement with clients.

- Serious negligence, which causes unacceptable loss, damage or puts the health and safety of clients, staff or visitors at risk.
- Theft, deliberate misuse or damage to equipment or materials.
- Incapacity to work due to the influence of alcohol or possession of illegal drugs.
- Unsafe practices.

In such cases the following procedures will be used:

Informal Stage:

The student's PE will identify areas causing concern and requiring improvement with the student, setting informal improvement periods and a date for follow-up discussion.

If this does not remove the concerns about professional suitability, the PE will discuss the matter further with the student, the PT and the PEC, indicating the nature of the concerns and specifying an improvement period. In some cases, specific action may be required, for example submissions of a medical certificate.

This will be recorded on the student's practice education report/file and will be signed by the PE, PT, and the PEC as well as the student. It is imperative the university is contacted **as soon as concerns are identified**.

Any period defined for the purpose of improvement will operate on the basis that the improvement must be sustained thereafter. The ending of the improvement period will be noted; the student either being informed that the improvement is satisfactory or that further action will be taken.

In order that students shall be given reasonable opportunity for improvement the informal improvement period should be determined taking into account:

- The time by which the student can reasonably affect an improvement.
- The department's need to make a suitable assessment of the improvement.
- The likelihood of a re-occurrence.
- Any other factors relevant to the individual situation.

Formal stage concerns about professional suitability

This stage is for those behaviours that have not been resolved informally through the system described above and will be referred to the Head of Department (HOD). The PE will refer the issues that have arisen and the consequent action to the HOD. The HOD will discuss the current situation with the student. Throughout, the PEC / PT and PE will provide ongoing support, depending on circumstances and individual cases. The HOD will request further guidance and recommendations from the University, which may include disciplinary procedures.

Student Concerns

Students should discuss any concerns they may have with their PE. If a concern persists, they should seek support from their PT, the PEC and the Head of Department at UCC, in that order. Concerns should be dealt with as early as possible to ensure an optimal learning experience.

Additional Information for Practice Educator

Supervision and Feedback

It is **the student's responsibility** to liaise regularly with their PE to ensure that the interventions applied, and the manner of application is safe and satisfactory. Students working independently must inform the PE what they propose to do beforehand and how they plan to practice.

Students are personally responsible for any action/inaction they might take if they proceed without seeking agreement of a qualified member of staff.

PEs should provide formal supervision for one hour each week of the practice. The purpose of these meetings is to discuss progress, review and refine learning objectives, discuss reflective learning, and provide formal feedback. The Supervision Form (see module documents) should be used to record these sessions. The form should be signed by both the student and educator, and both should retain a copy. These forms should remain on site. A combination of formal and informal feedback should be continuous and be both positive and constructive.

Meetings/Liaison with Practice Tutors

Meetings are also to be scheduled with a PT. These meetings may include discussions in relation to the learning objectives, midway, final report. There should be at least one three-way meeting between student, PE and the PT per practice. Visits will be negotiated as necessary to undertake final assessment activity. The PEC may also complete a joint visit with a PT.

Supporting Struggling Students on practice placement

All students receive formal and informal feedback on their performance throughout their practice placement. If a student's performance is not at a satisfactory level, the student may receive a red flag. A red flag indicates performance which is inconsistent with the expected stage of competency development and can be awarded at any point of the placement. A red flag does not result in an automatic fail for a student. Nonetheless, their performance requires significant development during the remainder of their practice in order to achieve competence. In the event of this occurring, it is advised that the PE contacts the PT to decide on a course of action. The outcome of this discussion will be communicated to the PEC by the PT.

If clinical competencies require more/extra work than expected at this level, or there are professional conduct issues a **Concerns Identified Form** (see module documents) must be completed (this form can be used at any stage during practice placement). The PT meets with the student and informs the student regarding concerns. The student signs the concerns identified form and the PE assists the student with formulating an action plan. A copy of the Concerns Identified Form and action plan must be sent to the PEC. The action plan is reviewed

weekly by the PE and student. If the student is not meeting their goals, the reason is recorded, and the action plan is amended to reflect same. The PT makes weekly contact with PE and student to monitor the progress. The PT emails a brief progress report to PEC by end of each week.

Learning Philosophies Underpinning the UCC Occupational Therapy Programme

Adult Learning theories (Knowles, 1989; Knowles, Holton iii, Swanson, 1998) and the Construction of Learning theories (Kelly, 1984) and Creative Learning ideas (Higgs and Titchen, 2001 a & b) are the theories and constructs that underpin this learning. These foundations have been linked to the professional transferable knowledge, skills and attitudes that are needed to become artistic, creative, reflective practicing occupational therapists.

To incorporate these ideas, the UCC programme follows Task-Based Learning [TBL] in the occupational therapy Person, Environment, Occupations modules [PEO 1, 2, 3 & 4] in first, second and third year (see module documents for an overview of years 1, 2, 3 and 4).

This means that the students should be:

- Self-directed learners who can organise their time
- Familiar with working in groups and organising their workloads
- Able to appropriately interview people and clients in the service
- Able to source and collect relevant documents
- Demonstrate reflective and critical reasoning
- Demonstrate evidence-based practice
- Able to put a presentation together

Timeline for Practice Placement

Note: Timescales may be adversely affected by capacity deficits in practice sites

Responsibilities	Suggested Target Date
The Student Will:	
i) Accept responsibility for all costs, including: <ul style="list-style-type: none"> Accommodation Vaccinations Uniforms and name badges Medical coverage Travel & any required insurance cover First Aid 	Ongoing
ii) Make preliminary contact (via email) with the PT & PE with a letter of introduction; Practice Curriculum Vitae as well as a copy of their Hand Hygiene & Children First Certificates	Within 2 weeks of receiving allocations
iii) Attend both pre and post practice linking learning sessions	Pre & Post Practice
iv) Write a letter of appreciation to the Educator/Setting	Upon completion of practice
The Practice Service Will:	
i) Commit to practice education and book therapists onto the Practice Education courses.	Prior to practice (where possible) and during practice placement
ii) Maintain up-to-date site profiles	
iii) Provide 1 hours dedicated weekly supervision sessions	
Return Completed assessment documentation (CBFE) to UCC to meet exam board criteria and complete module evaluation	Upon completion of practice
Practice Tutors Will:	
i) Request practice placement offers from potential settings	Prior to practice
ii) Confirm the students to attend and provide details of Practice Education courses	Prior to practice
iii) Respond to students' initial email and provide them with a site profile and reading guide.	Prior to practice
iv) Be available during the practice.	Ongoing
v) Provide support to students and educators, before during and after practice, as appropriate.	Ongoing
vi) Arrange at least two tutorials to student(s).	Ongoing
vii) Address any student/educator queries during practice.	Ongoing
viii) Liaise with the University on practice progress	Ongoing
ix) Participate in student's learning reviews. (Yr2, Yr3 & Yr4)	At learning review meeting
x) Provide feedback to PE.	During and following practice

Student Induction Checklist

Pre-start date		
Task	Tick when completed	Comments
Complete mandatory: <ul style="list-style-type: none"> • First Aid and PM&MH training • Online HSEland Training: <ul style="list-style-type: none"> ➤ AMRIC Hand Hygiene ➤ An Introductions to Children First Course ➤ Dignity at Work ➤ Open Disclosure Module 1 ➤ HSE Cyber Security Awareness ➤ Fundamentals of GDPR • Familiarise yourself with the HSE Trust In Care Policy & CORU Standards of Proficiency 		
Prior to allocations, students are encouraged to disclose their learning needs and/or disability so that a plan can be created and sent to the PE.		
Receiving your practice allocation.		
Explore accommodation options.		
Contact your PT with your Practice CV and Letter of Introduction within 2 weeks of receiving allocation. Upon receipt of this, your PT will forward on the site profile to you.		
Then, contact your PE to confirm your attendance at the setting: Include your Letter of Introduction; C.V; & other relevant certificates.		
Check directions to service, arrange a visit if possible.		
Check start and finish times.		
Check uniform/dress code.		
Check pre-reading + website (if provided).		
Check who and where to report to on your first day		

First Week Tasks	Tick if completed	Comments
Service Details		
Overview of service		
Overview of OT Department		
Teams in the service		
Tour of the service		
Administration/Facilities		
Access to desk/chair/telephone		
Telephone system		
Office system (photocopier/typing/filing)		
Lock up system, check in/out board		
Policies and procedures		
Health and safety		
Fire regulations		
Important contact numbers		
Site facilities (canteen)		
Travel procedures		
Learning Resources		
Books, filing cabinet resources		
Continuing professional education		
Diary dates		

Aims and Objectives	Tick when completed	Comments
Consider learning opportunities and discuss with PE (in supervision)		
Set up supervision contract and arrange weekly supervision		
Consider study topics		
Student responsibilities at the setting		
Occupational Therapy Procedures		
Referral procedures		
Standardised/non-standardised Assessments		
Therapy rooms		
Groups in service		
Record keeping		
Possible Professionals to liaise (relate to caseload)		
Physiotherapy		
Speech and language therapy		
Psychologist		
Medical staff/related services		
Other		

The Learning Contract

One of the requirements of the WFOT (2016) guidelines is the use of a learning contract for each major block of practice.

The Learning Contract Consists of Four Key Elements

1. Induction/orientation.
2. Learning objectives.
3. Scheduled weekly one-hour formal supervision sessions. The UCC Supervision Form (see module documents) should be used to record supervision sessions.
4. Informal feedback.

Advantages of Learning Contracts

- It individualises learning so the learner is committed and motivated.
- It fosters inter-dependence and develops lateral thinking and problem-solving skills in the learner.
- It develops some of the competencies required for self-directed life-long learning.
- It focuses students' activities so that they feel they "own" their learning.

Learning Objectives

The learning objectives (see module documents) reconcile the requirements from the university and the setting with the learner's own goals and objectives. For this practice, learning objectives are formulated by the student following an orientation to the setting to which they are assigned. Both the student and the PE review the learning objectives and any specific changes are negotiated. Learning Objectives should follow the SMART format (Specific; Measurable; Attainable; Realistic and Timely).

During the induction phase, the student will decide how the learning objectives relate to the practice setting, how they will be accomplished, within what time period and make known what the specific criteria will be for each objective. The PT will provide support in ensuring the learning objectives are at an appropriate level for the student.

The student must negotiate and fulfil the learning objectives and be an active partner in his/her own learning process. Thus, there is shared responsibility for the outcome of the learning experience, as students must work in partnership with their PE.

Stages in Developing the Learning Objectives for the Student

The following highlights the five stages involved in developing learning objectives as part of your learning contract.

Step One
Defining your learning objectives: <ul style="list-style-type: none"> Identify your current knowledge and skills What do you want to learn? What does your PE think you might/should learn? Where are the gaps in your knowledge? Identify the demands and opportunities in the practice
Step Two
Set learning objectives: <ul style="list-style-type: none"> Which of the identified learning needs can be achieved in this setting? Objectives should be a specific behavioural statement about what you will be able to do by a given week and at what standard: “by week X I will (verb)”. Please see the list of action verbs in the module documents. <p><i>Ask your PE to check that your objectives are at a level appropriate for a Y4 student.</i></p>
Step 3
Specify resources & strategies: <ul style="list-style-type: none"> How will you accomplish each objective? Identify the resources (human & material) and the strategies you will employ.
Step 4
Evidence of accomplishment: <ul style="list-style-type: none"> Write down what evidence you will have to indicate how you will achieve this objective.
Step 5
Validation: <ul style="list-style-type: none"> Think about means of validating the evidence – Who? When? Where? Resources etc. It does not always have to be the PE; it might be other disciplines. Note: validation concerns the confirmation/endorsement of the standard of your work.
Step 6
Purpose: <ul style="list-style-type: none"> Why will this learning objective develop this specific competency?

The following guidelines are recommended for the development of the learning objectives:

1. The student receives a thorough orientation (week one).
2. The student identifies their own learning needs.
3. The student collaborates with the PE around site opportunities and learning needs.
4. By the end of week two the student should send a final draft of learning objectives to their PT.
5. The PT will provide advice on the design and implementation of the learning objectives.
6. The learning objectives will be reviewed regularly in supervision.
7. A list of “Action Verbs” for reference in refining objectives can be found in the module documents.

Sample Weekly Goals

The following week by week goals are **suggestions only**. These will differ at each practice site. The PE will guide the timetabled schedule at each site.

- Orientation to the service and philosophy of the service.
- Orientation to the department and philosophy of the department.
- Read Policies and Procedures, Health and Safety documentation and other relevant documentation.
- Make an appointment with the Occupational Therapy manager.
- Familiarise yourself with the roles of other members of staff.
- Make appointments with team members.
- Become familiar with the administrative procedures.
- Become familiar with record keeping protocols.
- Read up on the clientele at the service – update your information on client conditions.
- Active observation of assessments and interventions.
- Start to draft and refine your learning contract and learning objectives.
- Arrange weekly supervision times (student and PE).
- Discuss your baseline knowledge/skills/experience with the PE – review learning needs.
- Commence your reflective diary using free-flow writing.
- Sum up by asking yourself: “How was week one for you?”

Week Two

- Continue to familiarise yourself with the department.
- Finalise setting your learning objective.
- Read assessment manuals and practice use of and scoring assessments.
- Continue to observe assessments and interventions.
- Take the opportunity to talk to people (clients, carers, family) as allowed by the PE.

- Arrange to visit other centres.
- Take initiative with departmental responsibilities.
- Read client files to familiarise yourself with record keeping.
- Give input to OT's record keeping.
- Continue reflective diary.
- Read reference material.

Week Three

- Agree caseload and consider potential client for case study.
- Research background information for caseload.
- Adjust your learning objectives, if necessary.
- Participate in assessments and interventions.
- Commence scoring assessments.
- Communicate with other services re clients.
- Visit other centres.
- Continue to interview other staff members.
- Commence record keeping.
- Continue reflective diary.

Week Four

- Contribute to an MDT meeting.
- Continue to develop and review progress with learning objectives.
- Participate in assessments and interventions with therapist. Take lead under direction of therapist.
- Interview carers/family members.
- Select an activity and consider how this could be adapted for your client group using your knowledge of activity analysis.
- Continue record keeping.
- Submit a written report to PE on a client – use the occupational profile.
- Begin to plan intervention sessions for discussion with the PE and PT.
- Continue and review reflective diary.

Week Five Midway Evaluation

- Lead assessments and interventions under the direction of PE.
- Continue to work on learning objectives.
- Continue to work on case study and caseload.
- Demonstrate increased responsibility and initiative for departmental procedures.

- Present treatment plans for clients, linking your theory to practice.
- Present a verbal report of one treatment plan.
- Interview family, carers, possible 3-way meeting.
- Continue record-keeping.
- Continue and review reflective diary.
- Midway assessment with PE and PT.

Week Six

- Prioritise your time and discuss with PE.
- Continue to work on learning objectives.
- Continue to work on your case study and caseload.
- Demonstrate increased responsibility and initiative for departmental procedures.
- Present treatment plans for clients, linking your theory to practice.
- Interview family, carers, possible 3-way meeting.
- Continue record keeping.
- Continue and review reflective diary.

Week Seven

- Continue to work on learning objectives.
- Continue work on your case study, caseload and present work thus far to PE.
- Lead assessments and interventions with therapist.
- Contribute to case conference.
- Interview relative/carer.
- Continue record keeping
- Submit written treatment plans.
- Continue and review reflective diary.

Week Eight

- Continue to work on your learning objectives.
- Continue to work on your case study and caseload.
- Increasing level of independence in assessments/interventions/formulating treatment plans.
- Report verbally on your activity analysis.
- Demonstrate grading of activities and treatment plans.
- Submit written activity analysis for a client using your knowledge of activity analysis.
- Continue and review reflective diary.

Week Nine

- Continue to work on your learning objectives.
- More independent in carrying out assessment/intervention/formulating treatment plans.
- Demonstrate grading of activity and treatment plans.
- Discuss with PE handover of clients in Week 10 – formalise strategies for finalisation of caseload.
- Present case study to the Department and submit written copy to PE.

Week Ten

- Finalise learning objectives
- Lead assessments and interventions
- Continue record keeping
- Submit summary of reflective diary
- Complete self-appraisal of performance and submit to PE.
- Handover clients to PE and finalise arrangements to leave practice.
- Ensure hours logbook is completed correctly and signed by the PE.
- Make sure CBFE is signed by the PE.

Hours of Practice Education and the Hours Logbook

The Hours Logbook is documented proof you have completed the minimum 1,000 hours of practice-based education. It is a valuable document and should be treated as such. It is the student's responsibility to ensure it is completed **accurately** and **neatly** and kept in **excellent condition so that it can be clearly seen when it is scanned to CANVAS**.

- A usual practice week is 35 hours in duration.
- A student may count up to 37 ½ Hours a week with approval from the PE. Excess hours will not be counted.
- Any shortfall in the required hours will have to be made up, as a requirement for graduation.
- Students should detail the start and finish times for the morning and afternoon work. Lunch times and bank holidays are not counted in practice hours. Bank holidays and Sick Days should be recorded in the logbook also.
- If a student is unable to attend practice, they **must inform their PE by telephone call promptly on the day of absence, and their PT by text/email, as soon as possible, also indicating the day they are expected to return**. Medical certificates are required after two consecutive days of absence and should be forwarded to the PT and PEC. In some cases, it is also appropriate to provide a copy of this certified leave to your practice site.
- Any absences from practice must be recorded, e.g., sick leave, certified / uncertified. Practice education is examined on the continuous assessment model. Notwithstanding this we do recognise that on occasion unforeseen circumstances can affect continuous attendance. If a student is absent for **more than 20%** of any one placement, they may be required to make up this time or take the whole module at a later date. This judgement will be made in consolidation with the PE, PT and PEC.
- Students in 2nd, 3rd and 4th year are allowed 3 hours study time per week and **students must negotiate when to take this with their Practice Educator**. Students should remain sensitive to the needs of the service in this regard.
- Completing the logbook is a student responsibility. The logbook should be signed by the student, and they should present the relevant page for their PE's verification and **signature at the end of each week and at the end of the placement**. When a student has completed a practice module, they should fill in the **Year End Summary and the Practice Education Summary** – on the final page. At the end of placement, the PT verifies that it has been completed according to the procedure.
- At the end of the practice education placement, students should return their hours logbook containing all signatures (Student/PE/PT) to UCC via CANVAS. Please see CANVAS for date of submission deadline.

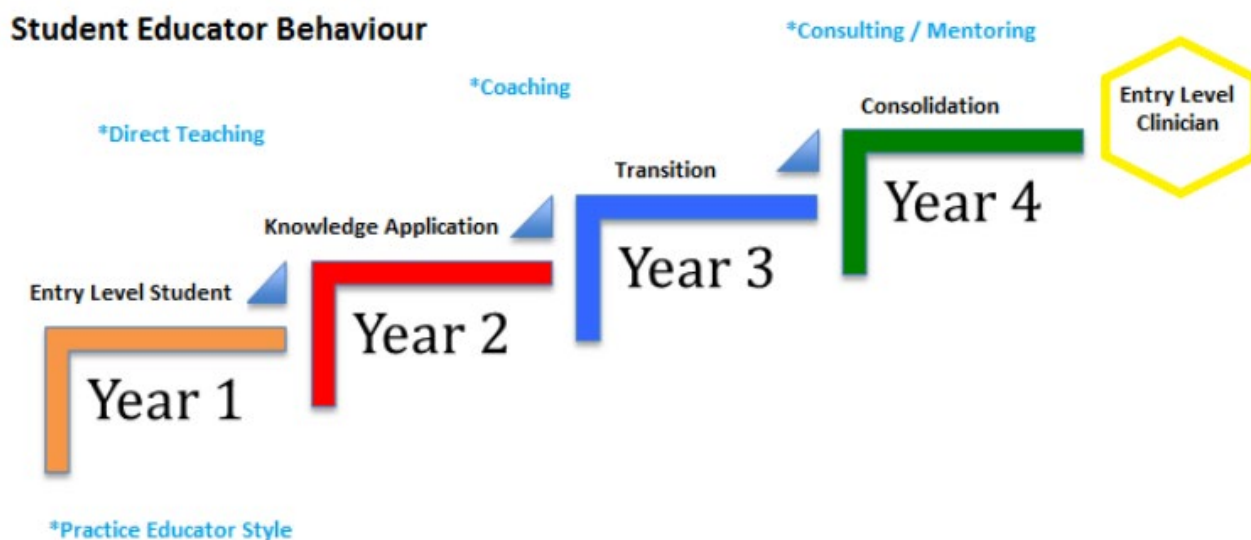
- The logbook remains the property of UCC. It is **essential** that students keep their own copy of completed hours in their Practice Education folder as evidence of completed hours is necessary to comply with WFOT (2020) minimum 1000 hours requirement.

The Competency Based Fieldwork Evaluation (CBFE)

The students' performance during practice is assessed at a level appropriate for their learning. An entry-level student progresses through the various stages of knowledge application, then there is a transition period followed by a period of consolidation (Frum & Opacich, 1987).

At the second half of this practice placement, the students transition between knowledge application and consolidation. Although students at this stage interact with the PE to varying degrees to solve problems and make decisions, they can make meaningful contributions as members of the team. Students begin to share and assume responsibility for all components of practice. Students should be encouraged to try and develop their own ideas and insights regarding clients, engage in discussion of solutions to clinical problems and begin to make decisions about the most viable course of action. Students should be encouraged to engage in self-analysis and reflection and to share and integrate previous learning experiences into their practice

Each student is individual and proceeds at different paces, at different stages and in different areas throughout the programme. We foresee that the course at UCC will promote the earlier stages in years two and three with year four being the consolidation, integration year. Year 3 is concerned with the move between transition to consolidation under a coaching teaching style (see diagram below).



The Aims of Assessment

- To provide feedback to the student on their performance.
- To identify student's strengths and deficits and modify learning accordingly.
- To determine level of competence to practice.

Student assessment consists of both **informal and formal elements**.

Informal assessment of learning during practice is by observation, discussion, written evidence, oral reporting, feedback from colleagues and the student's self-evaluation.

Formal assessment consists of PE's evaluation of achievement of the learning outcomes and performance indicators related to each of the seven competencies of The Canadian **Competency Based Fieldwork Evaluation for Occupational Therapists (CBFE-OT)** (Bossers et al. 2007).

The Competency Based Fieldwork Evaluation for Occupational Therapists (CBFE-OT) (see module documents)

The CBFE-OT has been chosen to guide practice development in the student's journey to becoming an Occupational Therapist. This measure was designed by Bossers (2002) to evaluate students at all levels in practice education. It is also used at the University of Limerick, Leeds University and nationwide in Canada. Self-directed learning is reinforced by the use of a learning contract and learning objectives (see module documents)

The evaluation is based on seven core areas of competencies and their domains are outlined on the CBFE form. These themes are recognised by **CORU** as **Standards of Proficiency**:



There is a clear alignment between these standards and the competencies listed below.

Competency	Domain of Competency
1. Practice Knowledge	Discipline specific theory and technical knowledge
2. Clinical Reasoning	Analytical and conceptual thinking, judgement, decision making and problem solving
3. Facilitating Change with a Practice Process	Assessment, intervention, planning, intervention delivery and discharge planning
4. Professional Interactions & Responsibilities	Relationship with clients and colleagues, legal and ethical standards
5. Communication	Verbal, non-verbal and written communication
6. Professional Development	Commitment to profession, self-directed learning, and accountability
7. Performance Management	Time and resource management, leadership

Midway Evaluation

At the middle of week five, the midway evaluation is completed by the PE. This midway evaluation is formative, and its purpose is to assist the student to further direct their own learning and competency development.

The evaluation is based on how the students consistently perform within each competency area. The midway evaluation report provides students with written feedback on their performance to date. It guides the actions to be taken by the student and educator in the last five weeks of practice. At this stage, learning objectives may be further refined.

There are no grades at midway, there are two options: satisfactory progress or a red flag. PEs should detail specific behavioural examples of student's performance and how the student can continue to develop, within the competency area. Then specify if Satisfactory Progress has been made or Significant Development (a Red Flag) is needed in the competency area by ticking either 'Satisfactory Progress' or 'Red Flag'. Please refer to page 28 for more information on supporting a [struggling student](#).

Please note that Satisfactory Progress at midway is not 'banked'. Students that have made satisfactory progress at midway will need to continue their competency development in order to reach the required level for entry level clinician.

Student Input

Students are required to complete a self-appraisal (not score) prior to the midway and final evaluations. This encourages students to reflect on practice and identify evidence of meeting their learning objectives. This self-appraisal contributes to the development of their personal and professional skills. Similarities and differences in evaluations may be discussed in supervision in order to further develop self-appraisal skills.

Final Evaluation

It is strongly advised that the final evaluation report is completed mid-week of the final week of the practice. The PE should *first* document specific **behavioural examples** of the student's performance, in the space provided. PEs must discuss their students' performance and discuss/work with PTs to ensure consistency in their assessment across the year. In conjunction, with your PT, the PE should select the grade that matches the student's behavioural examples for this consolidation stage.

In order to pass the practice, all competencies must be passed. Pass by compensation does not apply to practice modules. In the event of the competency being failed, a mark of 40% will be assigned to the practice. The overall practice result is an average of the seven competency areas (providing all are passed).

Student Input

As mentioned previously, students are required to complete a self-appraisal (not score) prior to the midway and final evaluations. Students are advised to document behavioural examples of their performance using the CBFE so they can fully discuss their competency development during assessment feedback sessions.

Guidelines for Completing the CBFE

For Practice educators

- For legibility, please complete the CBFE electronically.
- The behavioural feedback and resulting mark derived from this feedback, should be presented and discussed with the student.
- Completed CBFEs must be signed by the student, educator and tutor following both the midway and final reports.
- Please remember, that to award an '**excellent/exceptional**' mark, **performance examples must be commensurate with this high standard.**
- Please enter **the score at the end of each of the seven competency areas and input these into the front page** of the CBFE.
- The overall practice result is **an average** of the seven competency areas (providing all are passed).

Procedures for Students after completion of CBFE

- Please ensure the CBFE is accurately completed including student name and number on the cover page.
- Arrange for your CBFE to be signed by your PT.
- Retain a copy of your completed CBFE in your portfolio.
- Follow the directions on CANVAS for uploading your CBFE.

Post Practice Placement

1. After practice, each student will receive a Learning Review, (a date and time slot will be circulated via CANVAS) with your PT and PEC. In this review, the student summarises their learning and highlights any feedback to be given to the PE. Your PT will also check that your hours logbook and CBFE have been completed accurately and fully.
2. All students are required to attend post practice linking learning facilitated by the Practice Education Team.
3. The Practice Tutor will provide feedback to the PE, as appropriate.
4. Any CBFE that is not completed correctly will be returned to the PT/PE for amendment.
5. All results are provisional until they are confirmed and ratified at the Exam Board.

Recommended Texts for Year 3 Practice Education

Bossers, A. et. al (2007). *Competency Based Fieldwork Evaluation for Occupational Therapists*. Albany, NY: Delmar, Thomson Learning.

Clouston, T.J. (2015). *Challenging Stress, burnout and rust-out. Finding balance in busy lives*. UK: Jessica Kingsley Publishers.

Davis, L. & Rosee, M. (2015). *Occupational Therapy Student to Clinician Making the Transition*. SLACK Incorporated.

Deiuliis, E.D. (2015). *Professionalism across Occupational Therapy Practice*. USA: SLACK Incorporated.

Hersch, G et. al (eds.) (2005). *Activity Analysis Application to Occupation*. USA: SLACK Incorporated.

Jeffery, H., Robertson, L., Roodt, J.H. & Ryan, S., (2024). *Professional Reasoning in Healthcare: navigating uncertainty using the five finger framework*. West Sussex : Wiley-Blackwell.

Knapman, J. Morrison, T. (2015). *Making the most of Supervision in Health & Social Care*. UK: Pavilion Publishing and Media Ltd.

Sladyk, K. (ed.) (2002). *The Successful Occupational Therapy Fieldwork Student*. USA: SLACK Incorporated.

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- HSE. (2005). *Policy for Health Service Employers on Upholding the Dignity and Welfare of Patient/Clients and the Procedure for Managing Allegations of Abuse against Staff Members HSE -Employer Representative Division 63 -64 Adelaide Road Dublin 2*. <https://www.hse.ie/eng/staff/resources/hrppg/trust-in-care.pdf>
- Kelly, G. (1984) 'The psychology of personal constructs'. In, R. Ewen. *Introduction to theories of personality* (2nd. ed.) Orlando: Academic Press Inc.
- Knowles, M. (1989) *The making of an adult learner*. San Francisco: Jossey Bass.
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