UNIVERSITY of TASMANIA

# SCHOOL OF HEALTH SCIENCES
# OCCUPATIONAL THERAPY

## Supervisor Manual

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## Acknowledgement of Country

We acknowledge the Palawa/Pakana people of lutruwita (Tasmania) the traditional owners and custodians of the land upon which we live and work.

We pay respects to Elders past and present as the knowledge holders and sharers. We honour their strong culture and knowledges as vital to the self-determination, wellbeing and strength of their communities.

We stand for a future that profoundly respects and acknowledges Aboriginal perspectives, culture, language and history.

# About this Guide

The University of Tasmania would like to thank you for your ongoing commitment to supporting quality Professional Experience Placement (PEP) for our School of Health Sciences (SHS) students.

Your willingness to supervise and facilitate student learning in the practice environment enables the development of a safe and skilled future healthcare workforce.

This resource is designed to support you in your supervision role of students undertaking Professional Experience Placement (PEP) components of their Master of Occupational Therapy degree. The Guide is organised in two sections. The first section explains how PEP is structured within the Master of Occupational Therapy course at the University of Tasmania. The second section provides guidance on the process of effective PEP supervision to enable positive learning experiences for students as they develop the necessary capabilities as an entry-level practitioner.

An electronic version of this guide is available on the UTAS PEP Website Occupational Therapy - Professional Experience Placement | University of Tasmania ( https://www.utas.edu.au/health/professional-experience-placement/supervisors ) Weblinks throughout this guide are also referenced at the end of the document.

If you have any suggestions or additional content for the improvement of this guide, you are welcome to provide these via email to OccupationalTherapy@utas.edu.au.

# GLOSSARY

***Compliance*** - Completion of all mandatory legislative, regulatory, and university requirements. Students and placement providers must meet compliance for PEP to proceed - see page 11

***EFPC*** - Evaluation of Foundational Placement Competencies. Assessment tool used in PEP1 only.

***Learning Plan*** – All UTAS MOT students will complete a Learning Plan for each PEP, using the UTAS MOT template. It will be modified to reflect identified learning goals and strategies throughout PEP - see page 25

***MyLo –*** UTAS Student online learning platform.

***Professional Experience Placement (PEP)*** – the time each student spends implementing an occupational therapy process, or an aspect of an occupational therapy process involving human interaction with people or persons as client (individual, family, group or community to business, institution, agency or government). Also known as 'Clinical Placement', 'Fieldwork', or 'Practice Education'.

***Professional Portfolio*** – UTAS MOT students develop a portfolio throughout the course. It is assessed by UTAS MOT academic staff.

***Progression*** – successful completion of PEP to an acceptable standard, as measured by the relevant assessment tool (EFPC or SPEF-R2).

***SPEF-R2*** – Student Practice Evaluation Form – Revised (Second Edition) (SPEF-R2©). Assessment tool used in PEP2, PEP3, PEP4.

***UTAS MOT*** – University of Tasmania Master of Occupational Therapy

***WIL*** – *Work Integrated Learning* - WIL encompasses a range of activities including professional placements (see PEP) as well as online or virtual environments, and work-related activities assessed within coursework such as interprofessional team projects, and simulation-based learning.

## SECTION 1: PROFESSIONAL PLACEMENT EXPERIENCE (PEP) AT UTAS

## ABOUT PRACTICE EDUCATION AND PEP

The World Federation of Occupational Therapists (WFOT) is the international governing body of Occupational Therapists (OTs), and Occupational Therapy Council of Australia (OTC) acts on behalf of the Occupational Therapy Board Australia / AHPRA to accredit university programs. WFOT and OTC require that accredited occupational therapy courses include 1000 hours of practice education that reflect a range of current practice areas. The 1000 hours "... refers to the time each student spends implementing an occupational therapy process, or an aspect of an occupational therapy process involving human interaction with people or persons as client (individual, family, group or community to business, institution, agency or government" (WFOT, 2016, p.49).

The purpose of practice education "... is for students to integrate knowledge, professional reasoning and professional behaviour within practice and to develop knowledge, skills and attributes to the level of competence required by qualifying Occupational Therapists" (WFOT 2016, p. 48).
Practice education is underpinned by three main principles:

- education taking place in health, disability, aged care and community environments provides mutual benefits to students, the providers and the profession;
- learning is consolidated when students can actively link theory and practice within a supportive environment, and
- students need the opportunity to demonstrate, in a professional setting, that they can meet the standards of competence required for pre-entry practice and graduation.

UTAS uses the language of Professional Experience Placement or 'PEP' to refer to structured and formal learning experiences that enable students to put theory into practice within a workplace setting. PEP is also often referred to as 'prac' or 'clinical placement'.

PEP is a compulsory component of the UTAS Master of Occupational Therapy course, with all students undertaking 80 hours of work integrated learning (work-related activities assessed within coursework; including simulation-based learning), and 1000 hours of PEP within a variety of environments and Tasmanian regions.

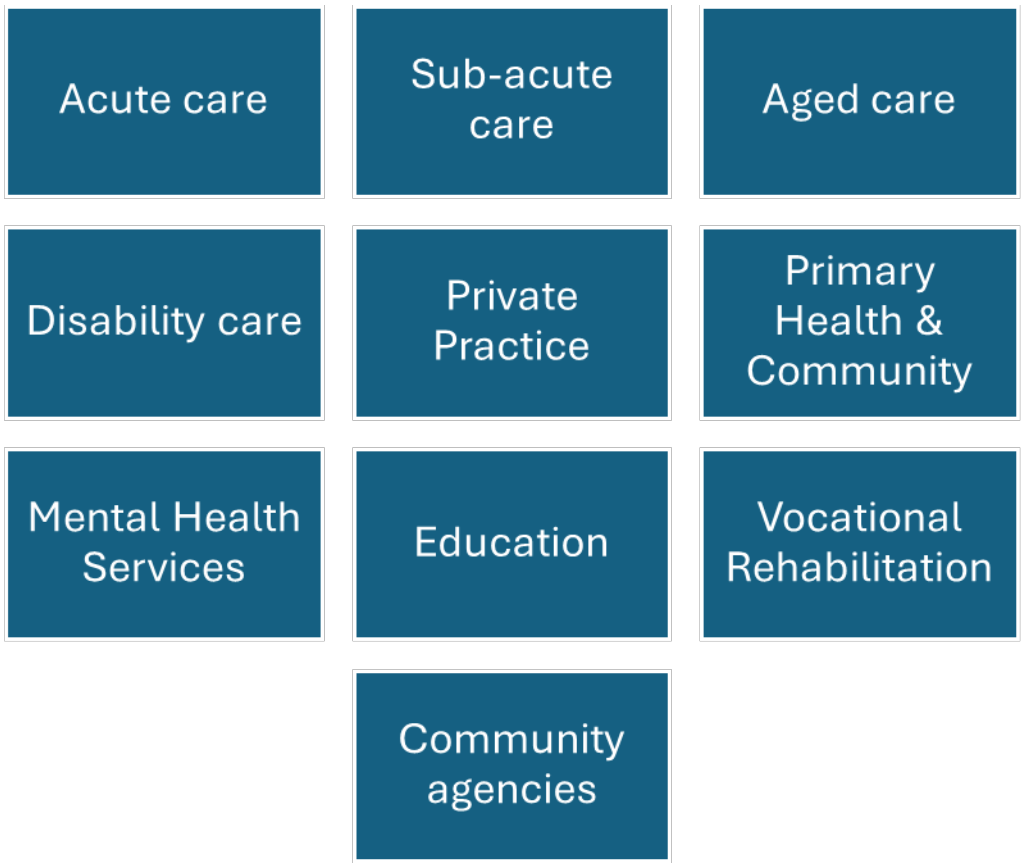
PEP is integral to the broad experiential curriculum of the Master of Occupational Therapy course, which aims to graduate students as safe entry-level occupational therapists. Through supported experiential learning, it is the role of supervisors to help contextualise occupational therapy practice; assist students to continually develop and put into practice the knowledge, skills and attributes requisite of entry-level occupational therapists.

Students will not experience every aspect of Occupational Therapy practice during PEP, but they will develop the essential skills that are transferable to other practice environments. Occupational therapy students undertaking PEP are supernumerary. This enables students the opportunity to learn and develop in PEP.

Students learn and develop in PEP through:

**PEP environments and locations**

To satisfy the requirements of the WFOT, OTC and University course requirements, students are required to complete a range of PEP's. The UTAS Master Of Occupational Therapy PEP has been designed in partnership with stakeholders for sustainability in the Tasmanian context. As part of their overall 1000 hours, students undertake placements during each stage of the course, across rural/remote and metropolitan settings such as:



## PEP IN CONTEXT OF THE CURRICULUM

The Master of Occupational Therapy at the University of Tasmania includes six units ('subjects') of study that include PEP. Some PEP is scheduled as a block of continuous days/weeks, and some is distributed part-time to allow students to continue with other coursework. Each 'Stage' in the table below is equivalent to a university semester. UTAS MOT has a mid-year intake, and students will commence in Semester 2 of each calendar year. Students may study part-time, which will alter duration but not sequence of units.

| | | | | |
|---|---|---|---|---|
| Stage 1 | CXA716 | Foundations of Occupational Therapy & Occupational Science | | |
| | CXA747 | Occupational Therapy with Children & Youth | | |
| | CXA705 | Becoming an Allied Health Professional | | |
| | CXA717 | Occupational Therapy Practice 1 | a. WIL – 3 day Simulation<br>**b. PEP 1 Part-time (15 days over 10 weeks)** | 160 hours |
| Stage 2 | CXA719 | Occupational Performance, Participation & Wellbeing | | |
| | CXA723 | Occupation, Environment & Enablement | | |
| | HGA746 | Aboriginal & Torres Strait Islander Health & Wellbeing | | |
| | CXA718 | Occupational Therapy Practice 2 | **PEP 2 Placement focused on group treatment planning & implementation**. Supervision by UTAS staff. Part time (1 day per week over 14 weeks). | 210 hours |
| Stage 3 | CXA750 | Occupational Therapy & Mental Health | | |
| | CXA746 | Developing as Allied Health Collaborators | WIL – Interprofessional student teams in residential aged care settings. | 40 hours |
| | CXA720 | Occupational Therapy Practice 3 | **PEP 3 – Project placement – Sustainability in health care.** Agency visits (3 days distributed), then 4 days per week for 6 weeks. | 233 hours |
| | CXA748 | Occupational Therapy Neuroscience for Rehabilitation and Enablement | | |
| Stage 4 | CXA722 | Chronicity, Complexity and Occupational Therapy Service Delivery | | |
| | CXA713 | Transitioning to Community-based Allied Health Practice | WIL – Interprofessional student teams develop a resource and capacity building plan with community organisations. | 40 hours |
| | CXA749 | Occupational Therapy Practice 4 | **PEP 4 Includes EBP translation project for PEP agency**<br>3 days per week for 5 weeks.<br>5 days per week for 6 weeks. | 400 hours |

*Please note: Within the Master of Occupational Therapy, the 1000 hours allocated to each student takes into consideration typical national and regional public holidays that occur each year over the course of the degree. Students do not need to 'make up' hours if PEP falls on a public holiday.

Throughout the practice placements, the specific expectations of students and assessment tasks to be completed during PEP are incremental. This means that each successive PEP supports the increased development and application of a discrete, but related set of skills, knowledge, and professional behaviours. Students transition from an introductory/foundational PEP in Occupational Therapy Practice 1 (CXA717), through to demonstrating the required level of capability as an entry-level practitioner upon completion of Occupational Therapy Practice 4 (CXA749) in accordance with regulatory, legislative, and professional requirements.

For a more comprehensive understanding of expected capabilities for each PEP please see individual PEP outlines, found online at Support for Supervisors - Professional Experience Placement | University of Tasmania.

## KEY UNIVERSITY CONTACTS

Within the School of Health Sciences, components of PEP are managed by the School of Health Sciences (SHS) PEP Team in accordance with University of Tasmania policies and associated College of Health and Medicine guidelines. PEP compliance ensures students and placement providers meet university guidelines, legal and ethical standards.

PEP compliance, offers of placement, and general PEP enquiries should be directed to the:
**SHS PEP Team (for UTAS Occupational Therapy Students) by emailing:**
**Tasmania.Placements@utas.edu.au**

**Fieldwork Coordinators (FWC)** are the primary university contact for students and supervisors for non-academic concerns before, during, and following PEP.
**Johnson Lock can be contacted at johnsonwaikong.lock@utas.edu.au, or via Teams by phoning 03 6324 3612.**

**PEP Unit Co-ordinator (PEP UC)** is a UTAS MOT academic, who has academic oversight for a course unit, containing a specific PEP. They work with all members of the PEP team to ensure each student receives a quality placement experience in accordance with course and unit requirements. For names and contact details, please see the individual PEP Outlines, found online at Support for Supervisors - Professional Experience Placement | University of Tasmania.

**Academic Placement Supports** are UTAS MOT academics who can respond to placement supervisor or student concerns regarding student performance and placement progress risks. For names and contact details, please see the individual PEP Outlines, found online at Support for Supervisors - Professional Experience Placement | University of Tasmania.

**PEP Website:** The College of Health and Medicine's PEP website is a source of information, providing up-to-date PEP resources to support you in your role. Students and supervisors can access general information about Occupational Therapy PEP here: Occupational Therapy - Professional Experience Placement | University of Tasmania Supervisors can access support here: Support for Supervisors - Professional Experience Placement | University of Tasmania.

**Student Support and Wellbeing Services**: Information about student support, including counselling services, can be found on the University website: Support and wellbeing | Uni life | University of Tasmania.

## PEP PROCESS

The University of Tasmania must ensure the safety of students, staff, and the broader community through completion of all mandatory legislative, regulatory, placement partner and university requirements.

The School of Health Sciences PEP programs are governed by the University's Professional Experience Placement Policy and a suite of process documents written and maintained by the College of Health and Medicine to guide students and stakeholders pre, during and post PEP.

Links to these documents are located under the 'compliance' and 'PEP Processes' tabs on the PEP Website www.utas.edu.au/health/professional-experience-placement. The following section provides an overview of student requirements.

**Student compliance**

Participation in PEP is conditional on students completing and maintaining all mandatory compliance requirements. The mandatory compliance requirements for UTAS Master of Occupational Therapy include:

- Safety in Practice Agreement
- Infectious disease and immunisation status (mandatory) and Health Assessment (if required)
- National Police Record Check Certificate
- Working with Vulnerable People (children) registration
- Safeguarding Children Training Module
- Manual Handling for the Health Industry
- First Aid, including basic life support
- Hand Hygiene

Current student mandatory compliance requirements can be found on the UTAS PEP website: Compliance | Professional Experience Placement | UTAS.
Placement providers can communicate additional local mandatory requirements to the SHS PEP team, at: Tasmania.Placements@utas.edu.au

**Professional standards**

Upon enrolment into the UTAS Master of Occupational Therapy course, each student is automatically enrolled on the Student Occupational Therapy Register with the Australian Health Practitioners Regulation Agency (AHPRA). As such, students are expected to conduct themselves and practice in accordance with the National Law (2009), registration standards, codes of professional and ethical conduct and guidelines that govern safe and effective Occupational Therapy practice in Australia as outlined in the Australian Occupational Therapy Competency Standards, 2018.

**General processes for students on placement**

| | |
|---|---|
| Students as supernumerary | A student cannot be substituted for an employee at any time. |
| Name Badges | Students must always wear their name badge, unless this contravenes the placement provider policy. |
| Uniforms | Students purchase uniforms, which they may be directed to wear on placement. Uniform consists of a short-sleeved University of Tasmania Polo shirt and long pants. Students may also purchase UTAS branded fleece vest. Students are advised to wear enclosed, flat soled shoes. Placement providers may advise students not to wear uniform. |
| Presenting relevant documentation | A placement provider may request to view a student's compliance documents at any stage during PEP. |
| Student scope of practice | To determine scope of practice of our occupational therapy students refer to the specific PEP Outlines at Support for Supervisors - Professional Experience Placement \| University of Tasmania . Students' scope of practice may also be influenced by placement provider policies and procedures. |
| Informed consent | Prior to all forms of direct client care, students are required to obtain the client's informed consent. In stage one of their studies students learn about their legal, professional, and ethical responsibilities as a student Occupational Therapist. Before the first placement students will have knowledge of material risk, effective communication and the three conditions that make consent legally and ethically valid, which are consent is:<br><br>1. Based on adequate information<br>2. By a person with decision-making capacity<br>3. Given voluntarily |
| PEP work pattern/hours | UTAS Master of Occupational Therapy PEP hours are set at 8 hours per day, including lunch breaks.<br><br>Public holidays are accounted for in course placement hours planning, and do not need to be made up.<br><br>Students can contact the placement agency to propose any changes to planned placement schedule. Agencies may agree to changes that maintain effective student learning, student safety, and adequate onsite contact.<br><br>Start/finish times and patterns can vary between placement providers.<br>Specific questions about placement arrangements can be directed to the Unit Co-ordinator. |
| PEP attendance | PEP attendance will be recorded by students using the 'Tracking Placement Hours' template. Students access this in their online Mylo modules and will present it for the supervisor to sign at the end of placement.<br><br>Missed PEP hours may be required to be completed at a later point, and are organised on an individual basis and at the discretion of the relevant placement facility and the UTAS School of Health Sciences.<br><br>Recurrent or extended absence from PEP for any reason, including illness or extenuating circumstances, may mean the student will be required to repeat the PEP unit of study. |
| Recording PEP absences | The attendance requirement for PEP is set at 100% to ensure that students have optimum exposure to the learning environment to meet the necessary expectations against the Occupational Therapy Competency Standards, 2018. In the event a student is absent they must undertake the following:<br><br>• notify the placement facility prior to the commencement of the day to be missed, by phone, and in line with the facility's local procedures. |

| | |
|---|---|
| | • notify the Field Work Coordinator (Tasmania.Placements@utas.edu.au) and Unit Co-ordinator (OccupationalTherapy@utas.edu.au) by email and follow directions given, including uploading of supporting documentation. |
| Private work commitments and conflicts of interest | Students who undertake paid employment are advised that attendance and performance in PEP must take precedence over their work commitments.<br><br>Students are to identify current or perceived conflicts of interest related to specific placement sites, and communicate these ASAP to the agency supervisor and fieldwork co-ordinator. This may include instances of family or friends providing or receiving care onsite.<br><br>Students will not be placed in their current workplaces, so to avoid conflicts of interest. |
| Work, health and safety information during PEP | All students are required to be familiar with the Work, Health and Safety information as referenced in the Safety in Practice Agreement form and can be accessed on the UTAS PEP website.<br><br>In the event that a student has an incident, accident or injury while on PEP, they must follow the incident/injury/accident reporting procedures within the agency workplace. Students must also report the incident/ injury/accident as soon as practicable to the Fieldwork Coordinator and Unit Coordinator. |
| Use of Artificial Intelligence (AI) on PEP | Students are introduced to AI in healthcare in the first stage of the MOT. Placement providers should include any local policies or procedures related to AI within student orientation. Placement providers and students are directed to AHPRA guidance for further information. |
| Insurance | The University of Tasmania's insurance program provides cover for students whilst undertaking unpaid placements approved by the University. See UTAS PEP website for further information. Student Placement Agreements - Professional Experience Placement \| University of Tasmania |

## EXPECTATIONS OF SUPERVISORS AND PLACEMENT PROVIDERS

An agreement between the University and placement provider will be formalised prior to placement, which details the responsibilities of the University of Tasmania, students, and the placement provider.
PEP providers and supervisors are expected to:

- provide an adequate orientation for their placement (depth of orientation will be guided by length and type of placement)
- educate the student regarding the policies and processes of the PEP agency. These will include policies regarding security, workplace health and safety and wellbeing, confidentiality of client records, manual handling, emergency procedures and required ethical behaviour.
- provide an area where the student can sit and work, and safely leave personal belongings
- provide opportunities to meet the learning objectives of the PEP
- meet regularly with the student to discuss expectations, plan and review the student's learning and the competencies to be addressed.
- provide feedback on performance progressively throughout the placement.
- provide the student with an evaluation of their performance, using the assessment tool provided by UTAS Master of Occupational Therapy.

Please see section 2 of this guide for guidance on providing a high-quality student placement.
Ultimately, the PEP agency supervisor assumes responsibility for the quality of the student's practice and the safety of clients and student whilst the student is on placement.

## STUDENT SCOPE AND SUPERVISION MODELS

'Scope of Practice' refers to the occupational therapy activities a health practitioner can undertake in line with their educational preparation, clinical skill capability and in accordance with organisational and regulatory requirements. Every health professional (inclusive of student occupational therapists) has a professional responsibility to work within the limits of their scope of practice. As students' progress through the Master of Occupational Therapy they acquire new knowledge, skills, and attitudes, and each PEP provides the avenue to consolidate and safely increase their scope of practice. It is important that students have opportunities to develop into entry-level practitioners in a well-supported and safe environment, maintaining their duty of care to other health professionals and the public. Over the course of their study program, a student's scope of practice will broaden under the guidance and supervision of registered occupational therapists during PEP.

Decisions around scope of practice is a collaborative process and is ultimately at the discretion of the supervising registered occupational therapist and within the learning outcomes of the PEP unit (refer to individual PEP Outlines for learning outcomes). Therefore, supervisors often ask questions to determine a student's level of preparation and experience to ensure they can delegate tasks safely within an individual's scope of practice at that time. As students proceed through their degree, they are encouraged to consider, review and refine what is within their individual scope of practice, and to share what knowledge and skills they have been exposed to in the lead up to placement with their PEP supervisors. Prior to each PEP, students develop an individual learning plan and receive information regarding managing and maintaining their scope of practice.

**Models of supervision**

During PEP, all occupational therapy students are supervised and supported in their learning by a registered occupational therapist who will mentor and guide them to expand their developing capability in practice. Whilst supervision of students in PEP always involves a registered occupational therapist, models of supervision can differ from one PEP design to another, and from one placement facility to another. Supervision models relevant to UTAS MOT curriculum include:

*Supervisor model:* In this model, students work alongside a supervisor (sometimes also referred to as a supervising occupational therapist), within the placement facility as they provide supervised services for clients. While engaging in professional practice, supervisors will provide supervision, feedback and will support student learning and achievements during PEP. This model includes 1:1, 1:2, and other configurations of student and supervisor numbers.

*Educator model* (Clinical Educators): In addition to the supervisor model outlined above, some placement facilities employ clinical educators to support both students and their supervisors during the PEP.

*Academic Supervisor Model:* PEP 2 and PEP 3 in the UTAS Master of Occupational Therapy will use UTAS academic staff to provide supervision to students, in partnership with placement provider contact person/s, who may or may not be registered occupational therapists.

**Direct and indirect supervision**

All students must be appropriately supervised in practice, which could involve direct and/or indirect supervision, informed by the PEP design, individual student's capability, scope of practice and the incremental expectations of each PEP they are undertaking. PEP 1 and PEP 4 will typically use direct supervision, while PEP 2 and PEP 3 will typically use indirect supervision.

Individual PEP Outlines include recommendations for student scope and the degree of supervision required for each placement, found online at Support for Supervisors - Professional Experience Placement | University of Tasmania.

## STUDENT ASSESSMENT

Performance in PEP is assessed in accordance with the Australian Occupational Therapy Competency Standards, 2018 via the Evaluation of Foundational Placement Competencies (EFPC, PEP 1 only) or the Student Performance Evaluation Tool (SPEF-R2©).

Successful completion of the Master of Occupational Therapy is dependent on students achieving a satisfactory result (Pass) for all assessments that relate to performance and progression across all PEPs.

Students maintain a professional portfolio to collect evidence and demonstrate their progression and achievement against the Australian Occupational Therapy Competency Standards, 2018. UTAS academic staff will assess the portfolio, it does not require PEP supervisor action.
Students will develop and use a learning plan for each PEP, and will share this with the PEP supervisor to collaborate on PEP goals, expected performance, and strategies to achieve goals.

### Formative Feedback

Students will be supported throughout the UTAS MOT course to develop feedback literacy and reflection skills. See section 2 of this guide for support for supervisors to plan and deliver feedback.

### Summative Feedback and Evaluation

A formal review is completed using the EFPC or SPEF-R2© at 2 points during PEP, halfway and final. These reviews are designed to provide summative feedback, and formally evaluate and document the student's performance and progression. Each review consists of three components:

#### *Student self-assessment*

In preparation for the formal review, students rate their own performance on the EFPC or SPEF-R2©, and draw on reflections and feedback to draft updated learning goals.

#### *Rating of student performance on EFPC or SPEF-R2©*

The EFPC or SPEF-R2© is completed by the supervisor either during or prior to a formal discussion between the supervisor and the student. The supervisor and the student reflect on formative feedback provided to date, feedback from other sources (e.g. other professionals) direct observations of student practice, and evidence provided by the student as part of any self-assessment activities.

EFPC and SPEF-R2© domain items are rated on a numerical scale, based on observation of student behaviour, evidenced in supervisor comments. Key concepts in rating scales include:

- safety and appropriateness (physical, psychological, cultural)
- the degree of assistance/prompting/monitoring required
- the level/application of knowledge and skills

For placements using the SPEF-R2©, students must pass core learning objectives for each domain to achieve an overall pass. This calculation is automatically generated if using the SPEF-R2© online system. Supervisors also complete a summary statement regarding the student's overall performance. The supervising Occupational Therapist will sign-off on the SPEF-R2© evaluation.

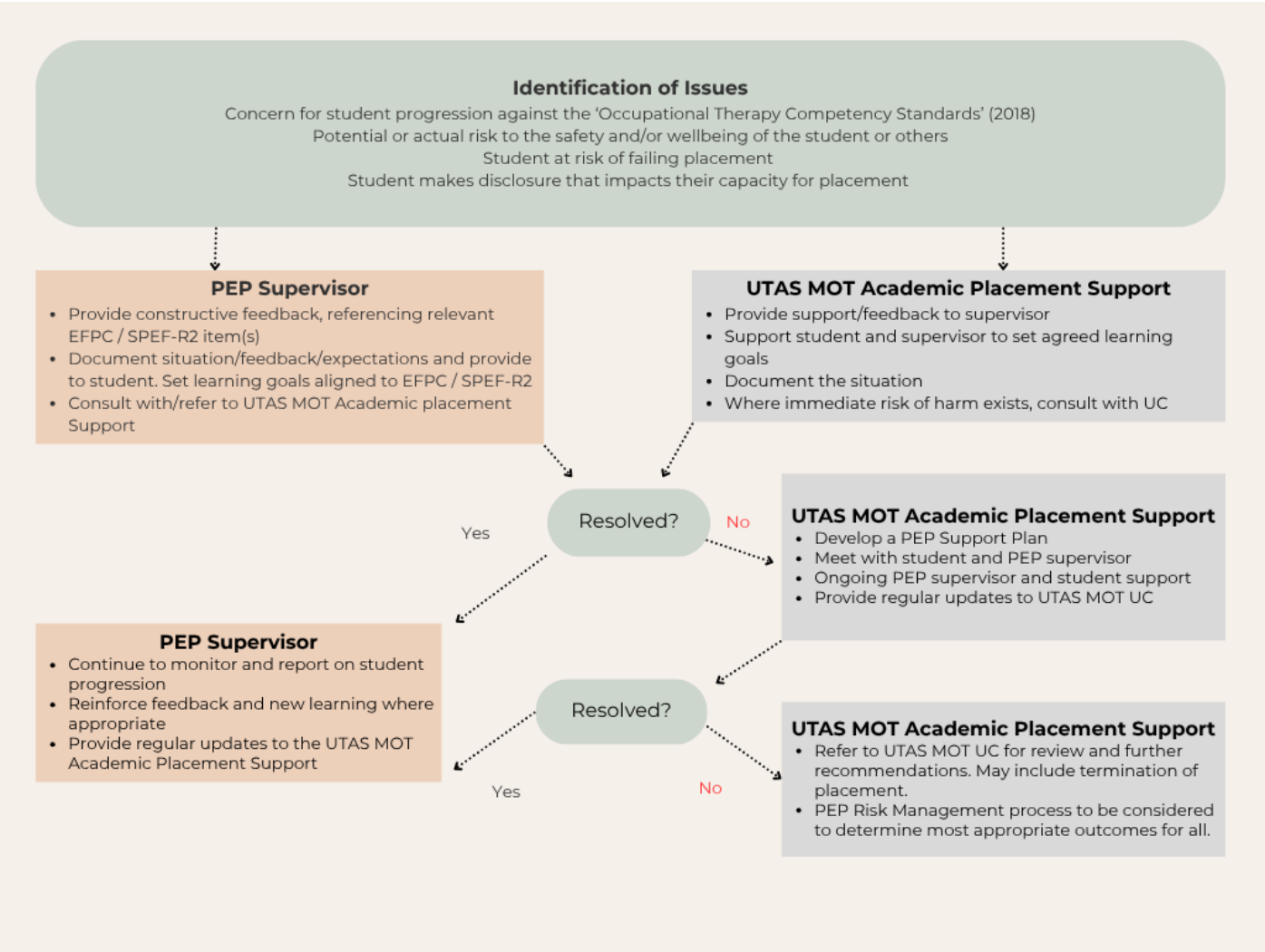
For advice and support on how to use the SPEF-R2©, both novice and more experienced supervisors are directed to the University of Queensland SPEF-R2© training website SPEF-R2 Training - University of Queensland. The UTAS OT Academic Placement Support can offer some advice where issues remain.

For advice and support to use the EFPC on PEP 1, supervisors can consult the EFPC manual (on the UTAS PEP website), and/or contact the UTAS OT Academic Placement Support.

***Feedback and planning***

The supervisor and student identify any areas of learning that require further development, with the supervisor detailing examples of current/desired skills and behaviours. At midway review, student and supervisor review and update learning goals to achieve in the second half of placement. At final review, the supervisor and student may develop goals that the student can address in future placements.

## PROBLEMS WITH STUDENT PROGRESSION




Occupational Therapy
A brief guide and collection of helpful hints

## OVERVIEW OF RESOURCES

This section includes information on different aspects of enhancing the PEP learning and supervision experience, as well as managing challenges that may present. It is intended to support PEP 1 and PEP 4 supervisors – during PEP 2 and PEP 3 students will recieve supervision from UTAS academic staff.

For supervisors with experience in student placements, we hope these resources will complement your existing approach, knowledge and skills.

Less experienced supervisors may initially feel some hesitation, and commonly underestimate or second guess their capacity to supervise or facilitate students learning. However, if you are an effective communicator, have an interest in sharing your practice wisdom and playing an active part in developing our future health workforce, your contribution in the PEP space would be incredibly valuable.

The School of Health Sciences provides varied learning events and workshops to support supervisors. Keep your eye on the The Placement Experience - Professional Experience Placement | University of Tasmania.

**External PEP resources:**

| Resource | Description |
|---|---|
| SPEF-R2 Training - University of Queensland | Essential for new supervisors, prior to placement, to ensure placement aligns with intended outcomes, assessment using the SPEF-R2 is valid and reliable.<br>SPEF-R2 scenarios and FAQ.<br>General supervision skills. |
| Occupational Therapy Practice Education Collaborative - Queensland - University of Queensland | Supervision skills, including for novices.<br>Preparing for placement.<br>Challenging situations on placement.<br>NDIS and student placements.<br>PEP templates and worksheets. |
| Enabling Clinical Education Skills - ClinEdAus | Supervision skills.<br>Resources for placements in specific clinical areas.<br>Preparing for and delivering quality placements.<br>Tools to evaluate placement quality. |
| OTCEP Reflective Practice Guide | A clinical education guide to reflective practice. Developed by Occupational Therapists, Queensland Health. |
| Supporting health students in the workplace - Home | Tasmanian Health and UTAS resources to support high quality student placements. Includes 5 modules as a learning package. |
| HETI Superguide | Detailed manual to deliver clinical teaching in the health setting. Aimed at professional learners, but content can be applied to student learning on PEP. |
| Allied Health Learning Guide | Detailed manual of clinical supervision skills, best practice, resources. Aimed at professional supervision, but content can be applied to student supervision. |
| Peer Coaching and Work Integrated Learning | Detailed manual to plan and deliver peer placements (more than one student on placement). |
| Reflective practice - Clinical Excellence Commission | Range of tools to support reflective practice in healthcare, for supervisors. |

## SUPERVISOR KEY ATTRIBUTES

According to qualitative student survey research, highly desirable supervisor attributes are:

- approachable, friendly and welcoming
- interested, and an active listener
- respectful, open and available
- encouraging
- organised
- an effective communicator
- provides constructive feedback
- flexible and enthusiastic about clinical education and the profession itself
- provides appropriate orientation and grading of student responsibility
- provides clear rationale for interventions
- facilitates reflection with guided questioning

(Hummell, 1997; Naidoo & van Wyk, 2016)

Being a PEP supervisor includes carrying out the following roles:

| | |
|---|---|
| Manager: | ensuring a smooth, planned and motivating placement. |
| Observer: | actively monitoring student performance, client response and student/client interaction; acknowledges student learning style. |
| Instructor: | allows opportunity for questions; carefully listening; attention to student learning style; teaching a new skill; clear explanations. |
| Mentor: | allows time for support and feedback; is a mutually educative exchange; offers problem-solving; ensures privacy; maintains appropriate role boundaries. |
| Assessor: | analyses performance merits and problems; timely in identifying learning needs; relies on keen observation and documentation of observations; expectations are clear; certifies pass/fail based on SPEF-R2. |
| Feedback: | provides recommendations for improvement; is timely; relates to remediable behaviours; takes place in written, verbal, direct, indirect and peer feedback styles. |

(Best & Rose, 1996, as cited in otpecq, n.d.-a)

Barriers to effective supervision outlined by the Health Education and Training Institute (2012) include: being absent, rigid, intolerant or irritable; telling instead of coaching; and exhibiting a 'blaming' attitude. These behaviours can lead to student avoidance, anxiety, poor performance and impact on patient care and safety.

**Characteristics of quality placements**

A high-quality occupational therapy student placement is characterised by:

- sound university preparation and processes
- a welcoming learning environment
- detailed orientation and clear expectations
- graded program of learning experiences
- quality modelling and practice
- consistent approach and expectations
- quality feedback
- open and honest relationships
- supervisor experience and skills. (Rodger et al., 2011)

A range of tools are available for supervisors or agencies to evaluate the quality of their student placements. ClinEdAus resources can provide further direction: Evaluating the placement experience - ClinEdAus.

## PREPARING FOR PEP

Facilitating PEP and providing student supervision is a significant investment. Having time and space to prepare for each student PEP allocation will help shape a quality learning and teaching experience for students, yourselves, and other team members.

There is no prescribed way to prepare for PEP, and you may have developed local processes over time. Preparation tasks and timeframes will be dependent on the setting, and caseload. General considerations include:

- Ensure your organisation and key team members are provided with information, for clear understanding of roles and responsibilities in student supervision & support.
- Understand the expectations of the specific PEP – refer to individual PEP Outlines found online at Support for Supervisors - Professional Experience Placement | University of Tasmania
- Complete SPEF-R2© training if you will be using SPEF-R2© for the first time, or as a refresher.
- For PEP 1, familiarise yourself with the EFPC – the tool and user guide are found online.
- Consider any supervision skills you may want to prepare or develop – use the content of this guide to help identify your needs and options for supports.
- Use the 'Orientation Checklist' at the end of this guide (Appendix 1) to ensure you have resources ready. A timetable for the first day and week can also help students anticipate events and activities.

## STUDENT WELCOME AND ORIENTATION

Positive placement experiences begin with students feeling welcomed, receiving an appropriate agency orientation, and being included in the practice environment. Key actions for fostering student understanding and sense of belonging in a new environment include:

- cultivating a welcoming environment and establishing respectful relationships
- getting to know students as individuals
- setting clear expectations and
- providing a thorough orientation or introduction to the placement setting

**Welcoming and facilitating relationships:**

Students quickly sense whether they are welcomed or regarded as an imposition. Their sense of 'belonging' is a crucial factor in how they subsequently engage and benefit from the experience, particularly when they are in the early phases of their study journey. Encourage all staff to be welcoming of students and create a supportive learning environment. Introduce yourself, your background, role and interest in occupational therapy education and support. Introduce the students and the healthcare staff and support the building of positive, respectful relationships. Encourage connection with and interprofessional learning from students and staff from diverse health disciplines.

**Getting to know students:**

Getting to know each student as an individual and taking time to understand their placement goals is helpful. Ask about their background, previous experiences in the profession, and why they want to be an Occupational Therapist. These questions help you locate the student in the context of their lives and influences. Be attentive to the factors in their life that may influence their practice experience, including caregiving responsibilities, and their personal experiences with healthcare settings. Identify different students' preferred learning style to guide communication and teaching methods. Observing whether students 'hang-back', show initiative and 'step-forward', or are over-confident for their level of experience and 'barge right in' will provide insight into their interpersonal skills and level of confidence.

**Clear expectations and boundaries:**

It is important to establish clear expectations and boundaries for students early in the placement. Make your expectations clear in terms of: start, finish and break times; punctuality; social media use and confidentiality; professional respect; appropriate attire; scope of practice; procedure for notifying placement absence; the student role in emergency events; and documentation. Ask the student about their expectations of supervisors to ensure they are reasonable.

Orientation to the practice environment: Providing timely and relevant information about the practice environment empowers student learning and sense of belonging. Consider providing information on the following:

- your facility (conduct a tour identifying the location of toilets, kitchen, nearest cafeteria, where to keep valuables, parking arrangements and costs)
- supervision arrangements & workday organisation
- process for providing informal and formal feedback
- emergency procedures
- relevant workplace policies & procedures
- scheduled meetings and training sessions
- contact details for who to contact in what circumstances
- See UTAS PEP 'For supervisors' website for a suggested orientation template.

## FORMAL SUPERVISION & LEARNING PLANS

We recommend that supervisors schedule at least one formal supervision session per week on block placements (PEP 4). PEP 1 part-time placement may be better supported by brief sessions weekly, to review and plan for the following week, in addition to fortnightly sessions to engage in deeper reflections. For all PEP, formal supervision content and outcomes should be clearly documented, using the supervision template available to students on Mylo.

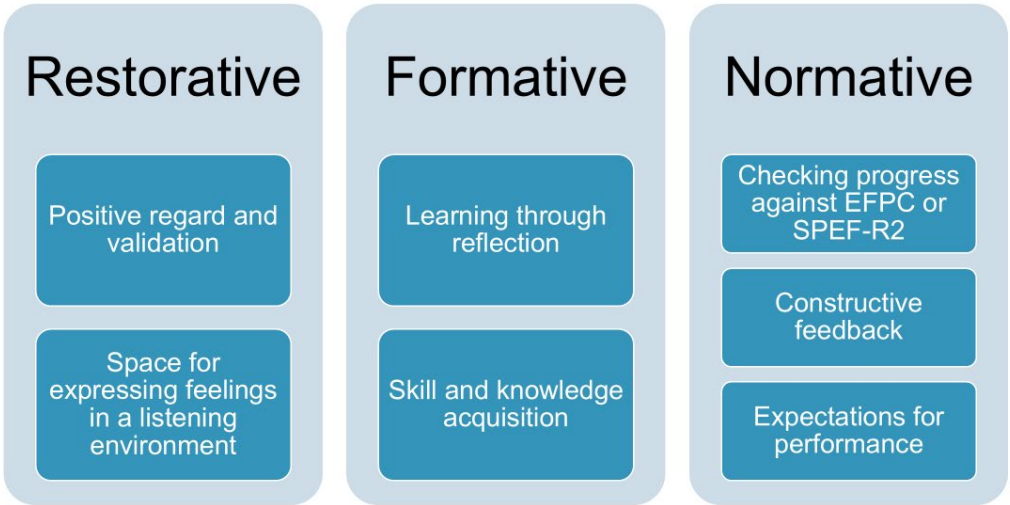
Students will use a 'Learning Plan' during placement, which will evolve and develop as placement progresses. The learning plan will identify goals, progress against goals, and strategies to achieve goals. Goals should be aligned with the EFPC or SPEF-R2© for best use of student and supervisor resources. Students are expected to prepare for formal supervision, using the 'Student Reflective Supervision Preparation Form', which is provided to them on Mylo.

Formal supervision is an opportunity to evaluate whether learning goals are on track, require modification, or are at risk of not being met. Supervisors and students synthesise feedback delivered throughout the previous week/s, to reinforce success, and ensure performance progress is clear to the student.

Formal supervision content may include:

- Reviewing clinical learning experiences, including clinical reasoning; applying theory to practice; assessment and treatment selection and delivery; outcome evaluation; ethical issues arising; and documentation.
- Reflections focused on an aspect of professional or learning behaviours, a clinical skill, or an area of practice.
- Exploring feedback collaboratively, to set or refine student goals, and develop strategies to meet goals.

Proctor's model of clinical supervision (below) outlines 3 approaches that can be included in effective supervision, and can help supervisors check that supervision content is balanced:




(Hawkins & Shohet 2002, as cited in Tuck, 2017)

## REFLECTIVE PRACTICE

Reflective practice is a fundamental skill to be developed by students throughout UTAS MOT, in order to meet Australian Competency Standards (2018) for safe practice. Reflective practice supports feedback literacy, resulting in increased feedback engagement and learning. Reflective practice will enhance students' self-awareness, and self-directed learning. PEP is an opportunity for ***critical*** reflection, through analysis and evaluation, including challenging assumptions and biases, in a safe supervisory relationship.

Supervisors can support reflective practice by:

- Ensuring students use their 'UTAS MOT Student Reflective Supervision Preparation Form' to prepare for formal supervision.
- Encouraging deeper reflection, by open–ended questioning, and allowing students time to process. See Reflective practice – Clinical Excellence Commission.
- Prompting reflection-before-action, reflection-in-action, and reflection-on-action, in line with Australian Competency Standards and the SPEF-R2©.
- Modelling your own reflections in daily clinical practice. Supervisors can verbalise their clinical reasoning and reflections before, during, and after clinical and other learning activities.
- Support students to identify reflection-in-action occurring when the student is observing health professionals.
- Prompt connection of practice to theory, to deepen understanding.
- Include action planning in reflective activities, to enable students to apply insights to future situations.
- Support student reflexivity, by prompting examination of how their own values, beliefs and assumptions influence their actions and interactions.
- Using reflective practice models during supervision, and for other learning activities. UTAS MOT students are familiar with Driscoll's, Gibbs, Kolb, and Rolfe Models – see table below (Driscoll, 2007; Gibbs, 1988; Kolb, 1984; Rolfe et al., 2001).

| | |
|---|---|
| Driscoll's Model (What? So what? Now what?) | What? So what? Now what? \| Reflection Toolkit \| Reflection Toolkit |
| Gibbs Reflective Cycle | Gibbs' Reflective Cycle \| Reflection Toolkit \| Reflection Toolkit |
| Kolb's Experiential Learning Cycle | Kolb's Learning Styles & Experiential Learning Cycle |
| Rolfe's Reflective Model | Model of reflection: The Rolfe et al. model - L&T Hub |

## DELIVERING EFFECTIVE FEEDBACK

Delivering feedback is frequently identified as a concern for supervisors. Supervisors can use the resources listed in this manual to reflect on their current skills and develop their skills and confidence further. Below are some general principles for delivering formative feedback, either immediately, or during a formal supervision session.

**Effective feedback is known to be:**

- Respectful.
- Sufficient - both often enough and in enough detail.
- Digestible – avoid overload.
- Balanced – include positive and constructive feedback. Students may need support to recognise both strengths and weaknesses.
- Focused on students' performance and behaviour, on their learning, and on actions under their control, rather than on the students themselves and on their characteristics. 'Address the work, not the person'.
- Timely, in that it is received by students while it still matters to them, and in time for them to pay attention to further learning or receive further assistance. Pay attention to client safety, privacy, and student state and readiness. Formal supervision or midway/final reviews are times to consolidate and reflect on feedback.
- Relevant - appropriate to the purpose of the learning experience (learning goals) and to the relevant criteria for success (EFPC or SPEF-R2©).
- Appropriate in relation to students' understanding of what they are supposed to be doing.
- Clear - received and understood by students.
- Acted upon by students.

(Gibbs & Simpson, 2005)

**Delivering feedback can use these principles:**

- Establish a climate of trust and respect, where the process of and commitment to learning is regarded as a partnership between the supervisor and student (Ovando, 1994). Maintain confidentiality and professionalism.
- A collaborative and respectful approach to feedback is best practice. Invite student involvement and agreement in the process of receiving and using feedback, goal-setting and problem-solving.
- Make sure the student understands that this is feedback.
- Allow students to evaluate their own performance. Students receive feedback from multiple sources, including their own observations, client responses, and their own emotions.
- Use an encouraging expression and refer to a desirable outcome. A calm, objective tone can support students to hear feedback e.g.' it is generally considered…'.
- Be factual, providing evidence-based examples, and observed behaviours/performance.
- Include observed attitudes and emotions (of students/supervisors/clients) if relevant.
- Include consequences, or potential consequences, of observed behaviours.
- Offer explicit strategies for improvement, and clear expectations of performance.
- Verify perceptions, checking that the student has understood the intention and meaning of the feedback – asking the student to rephrase can be helpful. Check concerns arising for the student.
- Document feedback, expectations, and strategies.
- Follow up, to monitor application of strategies, and support improvements in performance.

(adapted from OPTCEQ, n.d.-b)

Feedback can be structured to support reflective practice using Pendleton's model, described below:
*'What do you (the learner) think went well?'*
*'I (the supervisor) think this …. went well.'*
*'What do you (the learner) think you can improve?'*
*'I (the supervisor) think you could improve …..'*
(Burgess et al., 2020)

## ACTIVE LEARNING

UTAS MOT students are encouraged and supported to be active learners, as adult learners preparing for their Occupational Therapy careers. Active learning will benefit supervisors by decreasing the 'teaching load' on placement. Strategies to facilitate active learning include:

- Continual use of the student's Learning Plan.
- Encouraging students to develop questions and engage in independent activities to seek answers.
- Allowing adequate time for independent learning activities associated with clinical experiences.
- Structuring 'observational' activities to direct student attention to key factors, and/or engage in relevant adjunct activities. For example, reflective writing focussed on an aspect of OT practice; applying observations to an OT model.

## INTERPROFESSIONAL LEARNING

Interprofessional Learning (IPL) involves individuals from different health professions learning 'with, from and about each other to improve collaboration and the quality of care' (Barr, 2002, p.17). UTAS Allied Health Expansion Program has a strong focus on interprofessional education. Concepts of interprofessional teamwork, collaboration and respect are interwoven throughout the Master of Occupational Therapy curriculum.

UTAS MOT students come together with Physiotherapy and Speech Pathology students to complete coursework and residential school activities. Collaborative skills are further developed through work-integrated-learning activities in multidisciplinary groups in the 2nd half of the UTAS MOT course.

Involving students in IPL during PEP is critical to cultivating interprofessional respect and understanding early in their career, and underpins the provision of effective, collaborative health care. IPL can be embedded into daily health care activity, as opposed to being an additional, elaborate or time intensive undertaking.

Opportunities that may be available to, or planned for students include:

**Interprofessional education sessions:** Students across disciplines could attend in-service education sessions on topics with shared relevance (e.g. de- escalating patient aggression, guardianship and administration issues, grief and loss, conducting a family conference).

**Interprofessional collaborative care:** Examples of interprofessional clinical practices for student learning could include a multidisciplinary team meeting, case conference, clinical handover meeting, or discharge planning activity. Similarly, students from different disciplines could come together to critically reflect on a shared interprofessional event. Elements of collaborative care, such as communication, leadership, power, conflict and the focus of care could be critiqued.

**Structured observation of disciplines in practice:** Students could engage in a structured observation of staff or students from a different discipline planning, discussing, or providing care. For example, observing an initial assessment, client education session, attending a case review or discharge planning meeting. Students can be guided to reflect on the interaction, patient experience and engagement, noting the actions, knowledge and skills of the professional, goals and outcomes of the interaction, differences and similarities to their own profession.

## PEER LEARNING

Peer learning on placement refers to a wide range of activities and approaches, including:

- OT students at a single or multiple placement agencies meeting to share experiences, learning, and reflections.
- OT students engaging in placement activities together, with or without supervisor presence.
- OT students completing structured learning activities together (for example, preparing and presenting case studies).
- Placement models where an agency allocates more than one student to a supervisor or team of supervisors.

Peer learning research identifies a number of benefits, including skill development in clinical reasoning, communication and autonomy, reflective practice, and peer support (Pope et al., 2023). Factors associated with less desirable outcomes for agencies, supervisors and students have also been examined.

Agencies and supervisors interested in developing peer learning activities or models can use the resources listed in this guide to assist them.

## SUPERVISOR SELF-CARE

**Managing your own self-care and wellbeing**

Supporting quality student placement experiences requires personal and professional investment. People working in the health sector are often more prepared and able to take care of others, as opposed to taking care of themselves. However, attending to your own self-care and wellbeing is fundamentally important. There is a wealth of self-care literature and resources, however, for the sake of offering key ideas about where to start we suggest:

- Movement and exercise
- Nutrition and hydration
- Rest and relaxation
- Connection with others.

Whilst these are basic ideas, they are often the first things to go when we are stressed. Reflect on the strategies you need and how to make them accessible when stressed. For a well-developed and evidence-based approach to wellbeing (for students and supervisors) we suggest the ESSENCE model (Hassed, 2005).

Get outside for some sunshine and contact with nature. Go for a brisk walk, look at the sky, have a walking meeting as opposed to a sitting one. Make spaces in your day for moments of stillness, rest and relaxation. Savour your morning coffee as a self-care ritual, take a few mindful breaths before having a difficult conversation with a student. Play some music in the car or whilst doing paperwork. Do something that brings you joy every day. Stay connected with significant others in your life, and colleagues who build you up and support you.

Maintain your own clinical supervision and reflective practices during student placement. Supervising students is an opportunity for growth, skill development, and success.

## CHALLENGES ON PLACEMENT

Overall, supervisors and students enjoy positive experiences of PEP. However, when supervising students challenges may present from time to time, and it is important that you feel supported to respond effectively. As an overview:

- identify difficulties or challenges early, even if minor, to avoid escalation,
- choose an appropriate time and location to engage the student in conversation,
- model professional behaviour to communicate the issue respectfully, but clearly,
- provide specific feedback on what you / others are observing,
- use active listening skills to understand underlying reasons for behaviour or attitudes,
- determine required change / outcomes from the conversation and the support, resources, or information to enable these,
- document feedback, expectations, and strategies at all stages,
- seek the support of the Academic Placement Support at any point for information and support, and
- access relevant professional development.

Below are examples of challenging situations with suggestions on how you might manage these. However, each situation is unique, therefore you may need to seek advice to address a specific situation.

**The shy or under-confident student**

A student may compare their level of knowledge and skills to professionals, and doing so, experience a lack of confidence in their own ability. They may present as shy or introverted, unwilling to 'speak up' when interacting with staff, clients or their peers. To demonstrate the ability to gain and apply new skills and knowledge, and be safe in practice, student must find their voice and engage in a range of learning activities. Supervisors can provide encouragement, grade learning activities and expectations, and include positives in feedback. Reflective activities can be structured to prompt self-identification of emerging competency and reframe, for example naming positive points at the end of the day.

**The over-confident student**

While building student confidence and growing their knowledge and skills is an overall aim, these attributes need to be proportionate to the student's level of study, experience, and scope of practice, for safety. If over-confidence is a concern, seek collateral from different staff members, and ascertain specific occasions in which overconfidence was a factor, and what behaviours were observed. If you determine there is a problem, arrange to speak with the student, explain what has been observed and its implications, determine any underlying factors (overcompensating for insecurities, fear of or trying to please staff, unclear expectations). Ensure goals on the student's Learning Plan reflect the issue and expected behaviours. Document clearly for the supervisor's records and communicate concerns with the Academic Placement Support. Persistent issues may carry significant risks for the safety of clients, students, supervisor and colleagues, and if the student is unable to respond to feedback, it may lead to placement cancellation.

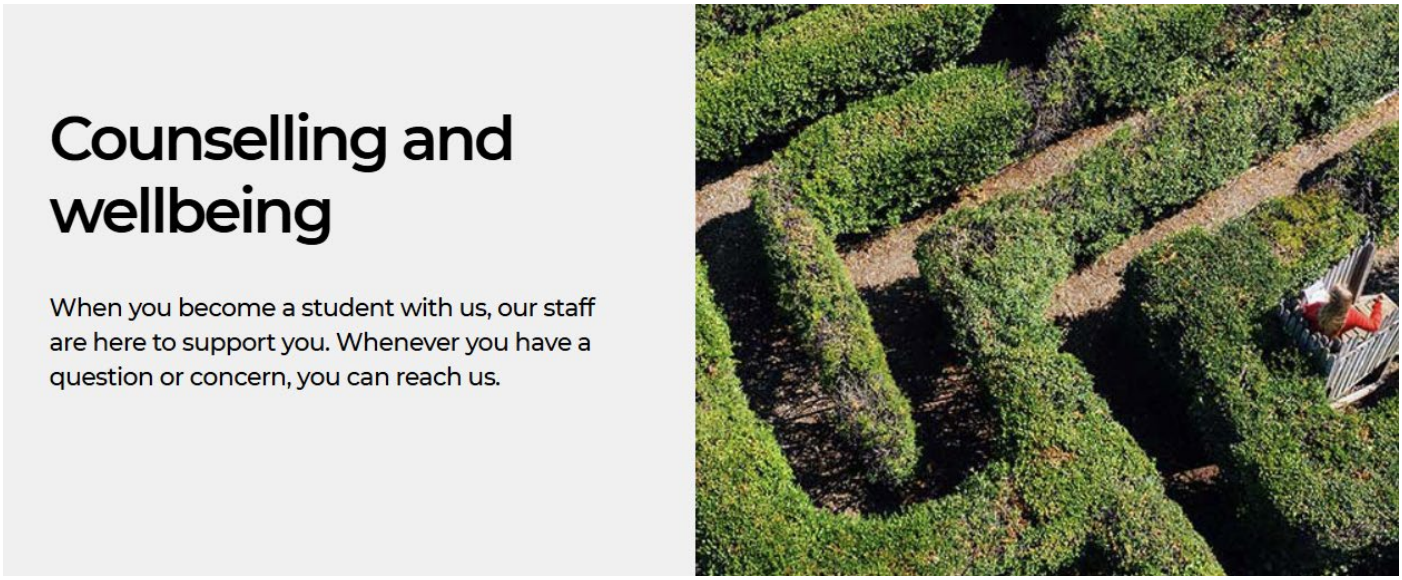
**Students who present as disinterested and disengaged**

It is important to address this issue early in placement. Communicate your observations of student behaviour, and explore the underlying reason for the behaviour. Culturally, students may express engagement in a way that is different to your own expression. They may feel overwhelmed, unsupported or lack confidence in their ability. They may feel that they are not being challenged or not given enough opportunity to learn. Sometimes students have overestimated their abilities or have unrealistic expectations of placement. Unhelpful mindsets or biases about specific types of practice settings may cause them to overlook the learning opportunities available to them. This is often a good opportunity to revisit learning goals and placement expectations and adjust accordingly. Whatever the source, it is important to provide feedback on observed disengagement and build strategies to resolve this issue. Students have a responsibility to be an active professional contributor to positive, quality placement experiences.

**The distressed student**

It can be stressful for students to put into practice newly acquired knowledge and skills in an unfamiliar practice environment and to meet other academic-based assessment requirements such as assignments. Additionally, many students are trying to concurrently balance paid work, family and other responsibilities. If you identify that a student is distressed and you are concerned for their wellbeing, acknowledge this and ask whether the student is willing to discuss this with you. You must explain that you cannot necessarily keep what the student discloses to you confidential, and that you may need to seek advice from the Fieldwork Coordinator or Academic Placement Support. This is essential if you consider the student to be at risk.

Sometimes just expressing what is happening for them is enough for students to feel better. Provide students with information about the range of counselling and support services that may be of value. Please access Counselling and wellbeing | University of Tasmania for more information about these.



## THE STRUGGLING STUDENT

Managing a student in difficulty is a challenging situation for a supervisor. The student may be identified as under-performing, at risk of failing, or actually failing their placement. The difficulties encountered by the student can be due to multifaceted internal or external factors. A level of empathy and commitment from you and the university to work with the student is required to achieve the goals of placement. Successful navigation through the difficulty requires early identification, open communication, skilled reflective practice and development of a clear plan of action with regular reviews between the student and yourself (Clin Ed Aus).

A general approach to struggling students is outlined below - sourced from Clin Ed Aus, accessed at Managing difficult situations - tools for supervisors - ClinEdAus (https://www.clinedaus.org.au/topics-category/managing-difficult-situations-tools-for-186). See section 1 of this guide for the UTAS MOT process for managing students at risk of progression.

- **Identify the problem**

Raise the concerns you have early and provide the student with specific examples of the behaviour you have observed. This includes providing timely feedback throughout the placement. Ensure feedback is accompanied by clear descriptions of required performance, and explicit actions the student should take to improve their performance. Do not wait until the midway or final reviews to raise your concerns with the student.

Consider which item(s) on the EFPC or SPEF-R2© relate to the issue. Record observations on EFPC/SPEF-R2©, and support/encourage the student to update their Learning Plan. Ensure formal supervision records clearly outline the issue, feedback given, expectations, and agreed actions.

Contact can be made with the UTAS OT Academic Placement Support at any time, and early communication of performance issues is encouraged.

- **Maintain confidentiality**

Universities require that confidentiality relating to academic and clinical performance, university grades and personal issues raised during supervision is protected while on placement, and after placement.

- **Explore the background to the problem**

Provide opportunity for the student to reflect on the feedback provided and discuss the background and contributing factors to any difficulties. Use of active listening and open-ended questions are useful skills to demonstrate in discussion with the student. You may also need to calibrate your expectations and interpretation of competent performance with other professionals if appropriate (while maintaining confidentiality), or the UTAS MOT Academic Placement Support.

- **Be Supportive**

Provide the opportunity for the student to explore solutions to the issues raised before problem solving for the student. Consider the student's preferred learning style. Help the student to understand you are working together to achieve the student's learning goals.

- **Consider any fears or anxiety the student may have, and support student wellbeing.**

Encourage the student to access supports they may already have in place. Direct the student to UTAS Support and Wellbeing services if the need is identified, and the student expresses readiness for this support - Support and wellbeing | Uni life | University of Tasmania (https://www.utas.edu.au/uni-life/support-and-wellbeing) Contact the UTAS Fieldwork Coordinator (FWC) for guidance.

- **Implement agreed actions and strategies to meet learning goals and monitor.**

Monitor performance, provide ongoing feedback, and continue to support the student to see the gaps between required and current performance. Recognise achievements and strengths when these are evident.

- **Document throughout the process**

Include all important observations, discussions and decisions in minutes of supervision sessions, ensuring you and the student have a copy of the documents, including agreed strategies and timeframes.

- **Seek support**

You can seek the support of your own clinical supervisor or line manager, or practice educators if available in your setting, regarding your concerns, being mindful of confidentiality. Self-care strategies and reflective practice will be important to maintain your own wellbeing, and to maintain high quality student supervision. Workplace teams can support you by contributing to student observations, and considering how to protect time for effective student supervision.

**Throughout the process of working with a student in difficulty, it is vital to remain in contact with the UTAS MOT Academic Placement Support**. You may feel the issues can be remediated during the course of the placement, however, communication with the university can assist the MOT team in planning subsequent placements, and ensure the student has demonstrated their ability to implement the skills they have been taught (Nemeth & McAllister, 2013).

- **Review and evaluate outcomes**

Final EFPC and SPEF-R2 will be the final evaluation of student performance. Failing a student is difficult for the student and yourself, and the response from the student may vary depending on their readiness to learn from the experience. Nemeth and McAllister (2013) describe readiness to learn as a student's "readiness to use the experience of failure in fieldwork placement as a catalyst to alter perceptions of themselves and their worldview… The experience of failure … can become a transformative learning experience" (p 117). Students who are not ready to learn from the experience and accept the failure can become angry, depressed or remain in denial and blame their clinical educator (Nemeth & McAllister, 2013; OTPECQ, n.d.-c). UTAS MOT Unit Co-ordinator will ensure supports and strategies are put in place to provide the student with their options.

In the event of a student failing on the final SPEF-R2©, or rated as 'Did not, or rarely demonstrated foundational level competencies to an acceptable standard' on the EFPC Summary Recommendations, the final determination of unit pass/fail will be made by UTAS MOT Unit Co-ordinator.

## AFTER PEP

**Ongoing professional development**

Quality learning environments not only value student learning and teaching, but the ongoing learning and professional development of staff. Being a registered Occupational Therapist requires ongoing professional development. This commitment to ongoing learning aids a sense of resourcefulness to manage increasingly complex health care issues and demands, supports networking and can reinvigorate your supervision practice. Place value on your own professional learning and development.

**Reflecting and seeking feedback as a supervisor**

Just as students benefit from constructive and timely feedback, so can we. Reflecting on our own performance as educators and supervisors enables us to acknowledge our strengths, determine what went well, and identify learnings we can take on board to enhance our practice.

Many supervisors take the time to critically reflect on these issues, on an individual basis, with peers, with a clinical supervisor, or with a clinical educator. Your workplace may like to facilitate a post-placement team debrief with a set of focused discussion points to facilitate reflection, and evaluate the quality of placement. A number of tools have been developed for placement quality evaluation if workplaces would like to evaluate more formally (Evaluating the placement experience - ClinEdAus).

Students are able to provide feedback at the conclusion of placement. Speak to the Academic Placement Support to understand use of the SPEF-R2© Student Feedback tool.

We thank you for your support and commitment to the supervision of our Master of Occupational Therapy students.

## APPENDIX 1: SAMPLE ORIENTATION CHECKLIST

| √ | Tasks |
|---|---|
| | **Welcome** |
| | Plan for the day/week |
| | Service/organisation outline, and OT scope |
| | Team introductions, including who the student can access for support |
| | Workplace facilities (personal item storage, workstation, washing and toilet facilities, food preparation and dining) |
| | Communication channels during placement (phone, email, availability) |
| | **Workplace specific requirements** |
| | Start and finish times, breaks |
| | Reporting absences |
| | Routine daily/weekly events (eg meetings) |
| | Security access requirements and any restrictions for student access |
| | Privacy and confidentiality protocols |
| | Social media and photography protocols |
| | IT and cybersecurity protocols |
| | Workplace values and code of conduct |
| | **Work Health and Safety** |
| | Emergency procedures (fire, evacuation, client emergencies, personal security) |
| | Reporting incidents or hazards |
| | Infection control |
| | Manual handling risks and management |
| | Equipment protocols |
| | Workstation set up |
| | Other hazards and control measures |
| | Maintaining wellbeing in this setting |
| | **Placement Expectations** |
| | Learning objectives for this placement |
| | Learning activities and student participation in the context of daily processes |
| | Supervision arrangements (including contracts if used locally) |
| | Student scope, delegation and sign off |
| | Formal and informal support, including feedback and debriefing |
| | Any shared supervision or peer arrangements |
| | Problem resolution planning (including accessing UTAS MOT supports) |
| | Student learning preferences and styles |
| | Student wellbeing within the setting – personal triggers or support needs |
| | Expectations for professional behaviours |
| | Summarise - Check that student and supervisor expectations align |

## REFERENCES


1. Barr, H. (2002). *Interprofessional education: Today, Yesterday and Tomorrow: a Review*. https://www.caipe.org/resources/publications/caipe-publications/caipe-2002-interprofessional-education-today-yesterday-tomorrow-barr-h
2. Best, D., & Rose, M. (Eds.). (2005). *Transforming practice through clinical education, professional supervision, and mentoring*. Elsevier Churchill Livingstone.
3. Best, D., Rose. M., Edwards, H. (2005). Learning about Learning. In M. Rose & D. Best (Eds.) *Transforming Practice through Clinical Education Professional Supervision and Mentoring* (pp.121-142). Edinburgh: Elsevier.
4. Billet, S. (2011). Curriculum and pedagogic bases for effectively integrating practice-based experiences. *Australian Learning and Teaching Council*. https://www.vu.edu.au/sites/default/files/CCLT/pdfs/billett-wil-report.pdf
5. Burgess, A., van Diggele, C., Roberts, C., Mellis, C. (2020). Feedback in the clinical setting. *BMC Medical Education, 20*(S2). https://doi.org/10.1186/s12909-020-02280-5
6. Campbell, M., Russell, L., Smith, L., McAllister, L., Tunny, R., Thomson, K. & Barrett, M. (2019). *A framework to support assurance of institution-wide quality in Work Integrated Learning*. https://drive.google.com/file/d/13Voqe_rqb0MMpYNC1BGs3MpBMtudKy5n/view
7. *Characteristics and expectations of effective clinical education*. (n.d.-a). Occupational Therapy practice education collaborative Queensland (OTPECQ). https://otpecq.group.uq.edu.au/resources-publications/clinical-educators-resource-kit/pre-placement-considerations-student-clinical-education/characteristics-and-expectations-effective
8. Driscoll, J. (2007). *Practising clinical supervision: a reflective approach for healthcare professionals* (2nd ed). Edinburgh, Bailliere Tindall Elsevier.
9. *Enabling Clinical Education Skills*. (n.d.). ClinEdAus. https://www.clinedaus.org.au/
10. Gibbs, G. (1988). *Learning by doing: A guide teaching and learning methods*. Further education unit
11. Gibbs, G., & Simpson, C. (2005). Conditions under which assessment supports students' learning. *Learning and Teaching in Higher Education*, (1), 3-31.
12. Hassed, C. (2005). The ESSENCE of health care. *Australian Family Physician*, *34*(11), 957. https://doi.org/10.2267/0300-8495.34.11.1913
13. Health Education and Training Institute. (2012). *The superguide: a handbook for supervising allied health professionals*, HETI, Sydney. https://www.heti.nsw.gov.au/__data/assets/pdf_file/0005/424859/HETI_Superguide_Txt_WARAHETI_OCT_19.pdf
14. Health Education and Training Institute. (2012). *The Learning Guide a handbook for allied health professionals facilitating learning in the workplace*. Sydney: HETI. https://www.heti.nsw.gov.au/__data/assets/pdf_file/0008/424862/allied-health-learning-guide.pdf
15. Hummell, J. (1997). Effective fieldwork supervision: Occupational therapy student perspectives. *Australian Occupational Therapy Journal, 44(4)*, 147–157.
16. Kirke, P., Layton, N., & Sim, J. (2007). Informing fieldwork design: Key elements to quality in fieldwork education for undergraduate occupational therapy students. *Australian Occupational Therapy Journal, 54(*S1), 3-22.
17. Kolb, D.A. (1984). *Experiential learning: experience as the source of learning and development*. Prentice-Hall.
18. Ladyshewsky, R., & Sanderson, B. (2020). *Peer Coaching and Work Integrated Learning*. Curtin University. https://research.curtin.edu.au/healthsciences/wp-content/uploads/sites/6/2020/03/Guidebook_Peer-Coaching-and-Work-Integrated-Learning.pdf
19. Naidoo, D., & Van Wyk, J. (2016). *Fieldwork practice for learning: Lessons from occupational therapy students and their supervisors*. *African Journal of Health Professions Education*, *8*(1), 37–40. https://doi.org/10.7196/AJHPE.2016.v8i1.536
20. Nemeth, E., & McAllister, L. (2013). Learning from failure. In Stagnitti, K., Schoo, A., & Welch, D., Clinical and fieldwork placement in the health professions (2nd Ed) (pp. 115 – 127). Melbourne, Australia: Oxford University Press.
21. Occupational Therapy Board of Australia. (2018). *Australian occupational therapy competency standards*. https://www.occupationaltherapyboard.gov.au/Codes-Guidelines.aspx

22. *Occupational Therapy Clinical Education Program (OTCEP) A clinical education guide to reflective practice*. (2022). Queensland Health. https://www.clinedaus.org.au/images/editorimages/Guide%20to%20reflective%20practice%20OTCEP%20(1).pdf
23. Occupational Therapy practice education collaborative Queensland (OTPECQ). (n.d.-b). *Fact Sheet – Characteristics of Constructive Feedback*. https://otpecq.group.uq.edu.au/files/1225/Fact%20Sheet%204_1%20Characteristics%20of%20Constructive%20Feedback.pdf
24. Occupational Therapy practice education collaborative Queensland (OTPECQ). (n.d.-c). *Clinical Educators Resource Kit*.
25. Ovando, M. N. (1994). Constructive Feedback: A Key to Successful Teaching and Learning. *International Journal of Educational Management*, *8*(6), 19–22. https://doi.org/10.1108/09513549410069185
26. Pope, K., Barclay, L., Dixon, K., & Kent, F. (2023). Models of pre-registration student supervision in allied health: A scoping review. *Focus on Health Professional Education, 24*(2), 27–62. https://doi.org/10.11157/fohpe.v24i2.559
27. *Reflective Practice*. Clinical Excellence Commission. (n.d.). https://www.cec.health.nsw.gov.au/improve-quality/system-safety-culture/teamwork/reflective-practice
28. Rodger, S., Fitzgerald, C., Davila, W., Millar, F., & Allison, H. (2011). What makes a quality occupational therapy practice placements? Students' and practice educators' perspectives. *Australian Occupational Therapy Journal, 58*(3),195-202. https://doi.org/10.1111/j.1440-1630.2010.00903.x
29. Rolfe, G., Freshwater, D., & Jasper, M. (2001). *Critical reflection for nursing and the helping professions: a user's guide*. Palgrave.
30. Sachs, J., Rowe, A., & Wilson, M. (2016). *2016 Good Practice Report – Work Integrated Learning (WIL)*. Department of Education and Training. https://research-management.mq.edu.au/ws/portalfiles/portal/35597534
31. Schnell, A., & Weidenbohm, K. (2006). Occupational therapy fieldwork placements: A practitioner survey. *OT insight: Magazine of the NZ Association of Occupational Therapy*, *27*(1), 1-9.
32. Supporting Students. (2014). *Supporting health students in the workplace*. https://supportingstudents.org.au/
33. Tuck, J. (2017). A new approach to team clinical supervision on an acute admissions unit. *Mental Health Practice, 20*(5). 24-27. https://doi.org/10.7748/mhp.2017.e1122
34. University of Queensland. (n.d.). *OTPEC-Q: Enabling quality practice education*. https://otpecq.group.uq.edu.au/
35. University of Queensland. (n.d.). *Training for the Student Practice Evaluation Form - Revised (Second Edition) Package (SPEF-R2*). https://spef-r.shrs.uq.edu.au/
36. World Federation of Occupational Therapists. (2016). *Minimum standards for the education of Occupational Therapists*. https://wfot.org/resources/new-minimum-standards-for-the-education-of-occupational-therapists-2016-e-copy