I want to take you back, way back, to October 1996. At the time, there were, incredibly, no OT programs in the intermountain west, but there were programs on the books, ready for development, at both the University of Utah and Idaho State. My husband Hal and I were exploring job opportunities as we finished up our PhDs at Ohio State, and he had an interview at Utah State University. And so it happened that I sat down for coffee on a Saturday morning in the Salt Lake Airport with Dr. John Dunn, an energetic and visionary kinesiologist who was the Dean of the College of Health at the University of Utah. So committed was he to getting the OT program going, he was willing to give up weekend time and go wherever necessary to meet with potential faculty. He told me that they were ready to make the OT program a reality at the U and that it would be an MSc entry-level program, which was still not standard fare at the time. He told me he had talked to a new graduate of the Occupational Science program at University of Southern California, whom he thought was ready to come on board as Program Chair. That, of course, was JoAnne Wright.

Jo and I met for the first time on January 23, 1998 on the U of U campus. We immediately hit it off, and it was clear she had lots of ideas on how the OT program could be laid out. We talked about ways to bring in funding for the program, how the curriculum might look, and what resources were available to draw on, such as local clinicians and facilities; people like Nancy...
In order to meet certification standards set forth by the National Board for Certification in Occupational Therapy (NBCOT), occupational therapy students have to pass all of their academic coursework and also demonstrate entry-level competence in 2 level II fieldwork (FW) settings. FW educators are responsible for training occupational therapy students during their level II experiences and determining whether or not the student has achieved entry level competence in the specific level II setting. The Fieldwork Performance Evaluation (FWPE) replaced the previous level II competence tool in 2002 after three pilot studies to establish item validity and reliability (Atler, 2003). The new tool was designed to provide streamlined competency items without overlap, general enough to cover myriad practice settings, and reflect current ideals and requirements of service delivery.

The time has come to revise this document to improve the rating scale, update the items so they continue to reflect relevant and current practice, and make the scores available in an online format to allow for easy analysis of data. Most FW educators welcome the idea of an improved measurement scale and an electronic format; however it is less clear how FW educators view the ability of the items to represent current entry-level practice. How do you perceive the items in the FWPE? Do they represent current practice? Are there enough items to represent the scope of entry level practice? Are there too many items? Should the OT and the OTA instruments line up more closely? Should there be items that are measured but do not determine entry-level practice (such as OTA supervision or competence in wellness program service delivery)? AOTA has convened an ad hoc committee to revise the tool, and I am a member of that team. This group is building on the recommendations of the previous committee who did an extensive analysis of the OT Practice Framework, the ACOTE Standards, the NBCOT requirements, and the Standards of Practice for OT. Please email me if you have any specific feedback on the FWPE and the questions I posed above and let me know your thoughts. Jeanette.Koski@hsc.utah.edu
PRESENTING AT AOTA CONFERENCE

Jeanette Koski, MS, OTR/L: I was appointed to the position of FW Educational Special Interest Section coordinator and had the opportunity to run the business meeting for that group in addition to introducing the speaker panel. The speakers presented information regarding the experiential component of entry-level OTD programs. In addition to facilitating this meeting, I co-led the Academic Fieldwork Coordinator’s (AFWC) Forum where AFWC’s from around the country convene to learn about topics specific to their role. This is an important networking opportunity, as every OT program across the country has an AFWC, but there are limited opportunities for face-to-face interaction about problems specific to FW. I was a part of a panel of speakers who presented on how our program is meeting the ACOTE standard C.1.7, which requires that OT programs offering Entry-Level Masters degrees “Ensure that at least one fieldwork experience (either Level I or Level II) has as its focus psychological and social factors that influence engagement in occupation.” It was a fantastic opportunity to share our program with other AFWC’s who are trying to fulfill the same requirement at their institutions and be able to demonstrate leadership and innovation in meeting this standard.

Pollie Price, PhD, OTR/L: Along with my research team, I conducted a half day workshop to present findings from their national, multi-phase, multi-method study examining how occupation is addressed in curricula in the USA. Participants were provided the opportunity to examine their own curricula to develop strategies to better address occupation and measure outcomes at the curricular and instructional levels. Team members included Barb Hooper (CSU), Sheama Krishnagiri (SJSU), Andrea Bilics (Worcester), Steve Taff (WASHU), and Maralynne Mitcham (MUSC).
The Life Skills Clinic is going through some administrative changes as the current manager, Kasey Mitchell, MOT, OTR/L, CLVT, transitions to a part time position with the Division of Occupational Therapy. Kasey has been the moving force in getting the Life Skills Clinic established. Kasey deftly established all the administrative pieces (no small feat!) and was instrumental in hiring for and creating the opportunity to build the Pediatric Practice, as well as being a part of the Low Vision Practice.

Kasey is a can-do guy who has worked with some very complex clients and found solutions when others couldn’t. He made time to act as the front end person and deal with the various aspects of billing until we were able to hire Kim Werner, who has done a fabulous job formalizing all the processes needed in the clinic and is great to work with. Kasey never shied away from cleaning, painting, building, and installing as necessary to make the clinic what it needs to be.

Kasey will continue to see clients with functional difficulties, in addition to working on the implantable miniature telescope (IMT) team in conjunction with folks at the Moran Eye Center and working with people with low vision who are having difficulty with quality of life and functional independence in their lives. He will be missed as manager, but we appreciate all that he has done and will continue to do.

Faculty Awards

Dr. Beth Cardell
Fellow of Academy of Health Science Educators

Dr. Yda Smith
Distinguished Mentor in the College of Health
CONGRATULATIONS!

CLASS of 2014!

MOT

OTD

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