Competency Based Fieldwork Evaluation for Occupational Therapists (CBFE-OT): A Refresher

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Some slide information shared with permission from Ann Bossers, the first author of the CBFE-OT
Presentation Objectives

• Review basic tenets of the CBFE-OT

• Re-introduce & become familiar with the companion documents that support use of the CBFE-OT
Some Issues & Management Strategies

• CBFE-OT Bullet Points are not very descriptive
• Hard to know what these mean in action
• Remember – the bullet points do NOT cover / describe everything that student needs to do to demonstrate that competency
• Learning objectives must be fleshed out by student for self and preceptor clarity
• Everything on left hand pages in each competency is essential and MUST be demonstrated in each placement
We’ll look at communication

Competency # 5
5. COMMUNICATION

- Fosters open communication
- Listens actively
- Speaks clearly and appropriately
- Provides explanations and/or education that is at an appropriate level for the client
- Writes clearly and appropriately
- Modifies language for the listener
- Uses non-verbal communication appropriately and effectively

<table>
<thead>
<tr>
<th>STAGES</th>
<th>SCORE</th>
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</thead>
</table>
| 1      | 1 - Low Stage 1 competencies  
        | 2 - Rudimentary Stage 1 competencies  
        | 3 - Mastery of Stage 1 competencies/ Transition to Stage 2 |
| 2      | 3 - Transition to Stage 2  
        | 4 - Rudimentary Stage 2 competencies  
        | 5 - Intermediate Stage 2 competencies  
        | 6 - Mastery of Stage 2 competencies/ Transition to Stage 3 |
| 3      | 6 - Transition to Stage 3  
        | 7 - Rudimentary Stage 3 competencies  
        | 8 - Mastery of Stage 3 competencies/ ready to enter clinical practice |

The Competency Rating Scale

<table>
<thead>
<tr>
<th>Mid-term</th>
<th>Developing</th>
<th>Exceptional</th>
</tr>
</thead>
<tbody>
<tr>
<td>U</td>
<td>2 3 4 5 6 7 8 E</td>
<td></td>
</tr>
<tr>
<td>Final</td>
<td>U 1</td>
<td>U 1</td>
</tr>
</tbody>
</table>

Please circle the level of performance.

Comments: | Midterm | Final |
|-----------|---------|-------|

Entry Level Student | Entry Level Clinician
# ACOTRO - Units of Competence of Occupational Therapists

1. Assumes Professional Responsibility
2. Thinks Critically
3. Demonstrates Practice Knowledge
4. Utilizes an Occupational Therapy Process to Enable Occupation
5. Communicates and Collaborates Effectively
6. Engages in Professional Development
7. Manages Own Practice and Advocates Within Systems

## Competency Based Fieldwork Evaluation for Occupational Therapists

**CBFE-OT**

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

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**Profile of Occupational Therapy (OT) Practice in Canada: 2007**

1. D.1 Expert in Enabling Occupation
2. D.2 Communicator
3. D.3 Collaborator
4. D.4 Practice Manager
5. D.5 Change Agent
6. D.6 Scholarly Practitioner
7. D.7 Professional

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**College of Occupational Therapists - Essential Competencies of Practice for Occupational Therapists in Canada, 3rd Edition (May 2011):**


**Canadian Association of Occupational Therapists - Profile of Occupational Therapy Practice in Canada (2007):**
Companion Documents You’ll Need for Reference:

# 1

Essential Competencies

Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO)

- Online COTO
- [www.discovermacotfieldwork.ca](http://www.discovermacotfieldwork.ca)

These define the **absolutes** of OT practice throughout Canada
Competency Description

CBFE #5. Communication
Verbal, non-verbal and written communication, open communication, active listening, respectful communication, manages conflict with diplomacy, modifies language for client needs

ACOTRO Unit #5. Communicates and Collaborates Effectively
Occupational therapists use effective communication and collaborative approaches for safe, ethical and effective practice.
ACOTRO has descriptor and break down of competency

CAOT Profile 2007 D.2 Communicator
As Communicators, the practitioner-client relationship is central to occupational therapy. Communication includes oral, written, non-verbal and electronic means.
ACOTRO Unit #5. Communicates and Collaborates Effectively

Occupational therapists use effective communication and collaborative approaches for safe, ethical and effective practice. ACOTRO has descriptor and break down of competency.
Clinical Work

Unit 5: Communicates and Collaborates Effectively
Occupational therapists use effective communication and collaborative approaches for safe, ethical and effective practice.
5.1 Communicates effectively with client, interprofessional team and other stakeholders using client-centred principles that address physical, social, cultural or other barriers to communication.
5.2 Communicates using a timely and effective approach.
5.3 Maintains confidentiality and security in the sharing, transmission, storage and management of information.
5.4 Collaborates with client, interprofessional team and other stakeholders.
5.5 Works effectively with client, interprofessional team and other stakeholders to manage professional relationships.

Non-Clinical Work

Unit C: Communicates and Collaborates Effectively
Occupational therapists use effective communication and collaboration approaches for safe, ethical and effective development, delivery, oversight and/or improvement of systems and services.
C.1 Communicates using a timely and effective approach.
C.2 Maintains confidentiality and security in the sharing, transmission, storage and management of information.
Clinical Work

5.1 Communicates effectively with the client, interprofessional team members, and other stakeholders using client-centred principles that address physical, social, cultural or other barriers to communication

5.1.1 Fosters open, honest, and clear communication.
5.1.2 Delivers information in a respectful, thoughtful manner.

Non-Clinical Work

C.1 Communicates using an effective approach.

C.1.1 Fosters open, honest, and clear communication.
C.1.2 Delivers information in a respectful, thoughtful manner.
Cues: verbal, non-verbal, language, tone
C.1.3 Uses strategies that empower communication.
Cues: active listening, clarifying statements, inviting questions, plain language, appropriate level explanation, educating, prompting, communication styles, appropriate use of technology.
Cues: verbal, non-verbal, language, tone
5.1.3 Uses strategies that empower communication.
Cues: active listening, clarifying statements, inviting questions, plain language, appropriate level explanation, educating, prompting, communication styles, appropriate use of technology
5.1.4 Adapts communication approach to ensure that barriers to communication do not impact the client’s ability to direct own care process.
Cues: language, hearing loss, vision loss, literacy level, inability to communicate verbally, cognitive loss, need for an interpreter
5.1.5 Employs educational approach as appropriate.
Cues: teaching aids, written materials, learner needs, formal teaching, informal teaching, feedback, evaluation
5.2 Communicates using a timely and effective approach.
5.2.1 Uses a systematic approach to record keeping of occupational therapy services.
Cues: client-centred, clinical reasoning, occupation-based

Maintains confidentiality and security in the sharing, transmission, storage, and management of information.
C.2.1 Adheres to legislation, regulatory requirements and facility/employer guidelines regarding protection of privacy, security of information.
5.2.2 Maintains clear, accurate, and appropriate records of client encounters and plans. 
Cues: informed consent, results of assessment, interventions, client involvement, written, electronic 

5.2.3 Applies the various regulations that are specific to record keeping in occupational therapy. 
Cues: provincial and federal regulations; institutional policies 

5.2.4 Determines with client the right of others to client’s information. 
Cues: client right to have access, to clarify, and to comment on or modify the information. 

5.2.5 Discloses information in accordance with client consent. 

5.3 Maintains confidentiality and security in the sharing, transmission, storage, and management of information.
5.3.1 Adheres to legislation, regulatory requirements and facility/employer guidelines regarding protection of privacy, security of information.

5.3.2 Establishes and/or adheres to provincial and facility policies and procedures related to the management of information. 
Cues: acquiring, documenting, using, transmitting, storing, and disposing information

5.3.3 Takes action to anticipate and minimize foreseeable risks to privacy and confidentiality of information.
Cues: confidentiality and privacy of conversations, risks of disclosure in public or shared spaces, information technology, encryption, communication devices

5.4 Collaborates with client, interprofessional team, and other stakeholders.
5.4.1 Explains role in client services to team

C.2.2 Establishes and/or adheres to provincial and facility policies and procedures related to the management of information.
Cues: acquiring, documenting, using, transmitting, storing, information access rights and disposing information.

C.2.3 Takes action to anticipate and minimize foreseeable risks to privacy and confidentiality of information.
Cues: confidentiality and privacy of conversations, risks of disclosure in public or shared spaces, information technology, encryption, communication devices, etc.
5.4.2 Demonstrates receptiveness to others’ perspectives that serve the best interest of the client.
Cues: considers others opinions and perspectives
5.4.3 Demonstrates flexibility within team.
Cues: consults with, listens to, tasks with, supportive of, responsive to, collaborates with
5.4.4 Asks for support when appropriate.
5.4.5 Demonstrates leadership techniques appropriate to the situation.
5.5 Works effectively with client, interprofessional team, and other stakeholders to manage positive professional relationships.
5.5.1 Demonstrates sensitivity to issues related to diversity and difference.
Cues: Diversity includes but is not limited to, the impact of age, gender, religion, cultural beliefs, sexual orientation, ethnicity, ability

5.5.2 Adapts approach to consider impact of diversity on occupational therapy service outcomes.

5.5.3 Demonstrates willingness to set team goals and priorities, measure progress, and learn from experience together as a team.

5.5.4 Enables parties to openly communicate and consider other opinions.

5.5.5 Manages differences, misunderstandings, and limitations that may contribute to interprofessional tensions in an effective and diplomatic manner.
This document outlines the vision for excellence and progression of occupational therapy and occupational therapists practising in Canada.
As Communicators, the practitioner-client relationship is central to occupational therapy.

Communication includes oral, written, non-verbal and electronic means.
D.2 Communicator

Definition:
As a Communicator, the practitioner-client relationship is central to occupational therapy. Communication includes oral, written, non-verbal, and electronic means.

Description:
Occupational therapists enable communication and effective dynamic interactions with clients, team members, and others about occupations, occupational performance, and daily life, as well as about occupational therapy services. The communication role is also demonstrated in mediating and negotiating solutions, raising awareness of diversity, or other challenges. Communication approaches vary widely and require a high level of expertise that is adapted and changed in each different practice setting.
F.2 “Proficient” Communicator

KEY COMPETENCIES for the occupational therapist as a “proficient” COMMUNICATOR

F.2.1 Engage in and facilitate effective dialogue.
F.2.2 Convey effective written and electronic documentation with accuracy, speed, and fluency.
F.2.3 Design or implement systems to support effective communication.
F.2.4 Demonstrate skilled handling of diversity in communication, including situations with multiple or competing interests.
Appendix C: Sample Elements/Activities for Roles

**Definition**
As Communicators, the practitioner-client relationship is central to occupational therapy. As Communicators, occupational therapists are also educators, mediators, and information providers with team members, managers, clients, funders, and the public. Communication includes oral, written, non-verbal, and electronic means.

**Sample Elements/Activities**
Rapport, trust, and ethics in the occupational therapy-client relationship
- Empathy, compassion, trustworthiness, integrity
- Inclusion of the client voice in planning, decision-making, and evaluation
- Effective listening
- Use of verbal and non-verbal communication
- Eliciting and synthesizing information for client service
- Conveying effective oral and written information for client service
Flexibility in application of communication and critical thinking skills

- Awareness in communication of privilege of therapist salary, position, title, access to insider information, etc. in client relationships
- Judgment in communication to use managed confrontation to make issues explicit with respect and compassion
- Diverse occupational therapy-client relationships for different occupational therapy practices

Negotiation to exert professional expertise and responsibility while also listening for client expertise and evidence of self responsibility

- Public and media communication, where appropriate
Another Issue

How does a student know what they need to achieve in each level of placement?
What Can Guide?

<table>
<thead>
<tr>
<th>Placement</th>
<th>Canadian Fieldwork Level</th>
<th>Expectations of Students</th>
<th>Preceptors Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>OTCP I 4 weeks Nov-Dec (Year 1)</td>
<td>1</td>
<td><strong>Communication</strong>: Students <em>listen actively</em> with <em>openness and non-judgment</em>. Students are able to <em>engage</em> clients, families and team members appropriately. Students are <em>beginning to document basic</em> interactions with clarity and accuracy.</td>
<td>See full document in each working group today</td>
</tr>
<tr>
<td>OTCP II 8 weeks March - April (Year 1)</td>
<td>2</td>
<td><strong>Communication</strong>: Students engage clients and families in <em>all parts of the practice process</em>. Students initiate communication with team members about their <em>respective contributions</em> to client services. Students are <em>documenting all parts of practice</em> with clarity and accuracy.</td>
<td></td>
</tr>
<tr>
<td>OTCP III 8 weeks Jan-Feb (Year 2)</td>
<td>3</td>
<td><strong>Communication</strong>: Students communicate with clients and families on their <em>partial caseload</em> throughout the provision of services. Students provide <em>meaningful contributions to team meetings</em> for service provision. Students are completing all documentation with appropriate <em>depth and efficiency</em> for their <em>partial caseload</em>.</td>
<td></td>
</tr>
<tr>
<td>OTCP IV 8 weeks July - Aug (Year 2)</td>
<td>3</td>
<td><strong>Communication</strong>: Students communicate with clients and families on their <em>full caseload</em> throughout the provision of services. Students collaborate with team members as needed for the <em>best service provision</em>. Students are completing all documentation with appropriate depth and efficiency for their <em>full caseload</em>.</td>
<td></td>
</tr>
</tbody>
</table>
Personal Learning Objectives

• Everything on right hand pages in each competency is ADDITIONAL TO THE ESSENTIALS needed in the setting and the student should reflect her/his particular challenges

• These personal learning objectives MUST NOT be essential to practice in this placement environment

• At least one objective for each competency expected.

• Objectives need to be meaningful and reflect the individual strengths and challenges of the student.

• Students are asked to bring and share their previous placement’s summary of strengths and areas for improvement (not applicable in first placement, however – student should still be expected to reflect on strengths and challenges: feedback from self and others throughout academic course work in Term 1, previous work, volunteer and/ or educational experiences

• Students will not pass or fail on personal learning objectives, but these help to individualize student’s learning, and the completion of these and the quality of completion may inform other essential competencies (ie., Professional Interactions and Responsibility)

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The end product or evidence of accomplishment needs to “fit” with the approach to learning used to meet the stated objective. i.e. One would not identify a written report as the “Evidence of Accomplishment” to demonstrate effective development of rapport with a client.
Completing the Evaluation - Practicalities

- Pre-Placement: student reviews summary from most recent placement strengths and challenges, or in Term 1, review past experiences: term 1 academic course feedback, jobs, volunteer positions, undergrad
- Students use above to assess what s/he needs to do relative to the new placement s/he is preparing for
- Helpful to pre-schedule midterm and final evaluation meetings
- Students are required to do a written self-evaluation at midterm and final in advance of meeting with preceptor.
- Preceptor may request copy of student’s self-evaluation in advance of evaluation meetings
- Preceptor also completes a written evaluation in advance of evaluation meeting with student

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Arriving at a Final CBFE-OT Rating

- There will always be an element of individual interpretation as to how to assign a rating to each competency.
- Ratings for Competencies 1 through 7 should **not** be averaged to arrive at the # 8 Overall Rating of Student Performance.
- Instead, consider and discuss the weighting you and your student place on the various competencies and your demonstration of each to help you arrive at this overall rating.
- Please feel comfortable contacting Clinical Education for discussion on this or any aspect of the placement process.

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Thank-you!!!

We are here to answer student & preceptor questions:

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