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Preparing Occupational Therapy Students in a Role-Emerging Private School-Based Setting

Jerome Amigo

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PREPARING OCCUPATIONAL THERAPY FIELDWORK STUDENTS IN
A ROLE-EMERGING PRIVATE SCHOOL-BASED SETTING

By

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A doctoral project submitted in partial fulfillment
of the requirements for the

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Abstract

This capstone project occurred in collaboration with Cornerstone Christian Academy in Las Vegas, Nevada. As a role-emerging area of practice, occupational therapy must focus on integrating services in private schools just as much as public schools. The need for resources to support future fieldwork students at Cornerstone Christian Academy makes it difficult for occupational therapy students to enhance their experiential learning opportunities and serve an underserved population of primary and middle school students.

The capstone project consisted of daily engagement with Cornerstone Christian Academy's educational personnel, attending students, and the parents of the students for 14 weeks to ensure all stakeholders involved will benefit from the capstone project. These interactions resulted in creating an evidence-based fieldwork manual tailored to guide fieldwork students through their experiences. Delivery of occupational therapy services in private institutions such as Cornerstone Christian Academy can serve as a model to bring attention to the limited educational support such institutions may face. Shedding light on the increasing demand for school-based support services in private schools and fieldwork experiences in role-emerging areas provides an opportunity for occupational therapy to fulfill multiple needs to achieve the common goal of academic success.

Dedication

First, I want to thank the staff members at Cornerstone Christian Academy for allowing me to connect with their amazing community. I am grateful for the opportunity to develop a capstone project that can benefit many academy stakeholders. I also plan to implement treatment interventions for students needing health services. I have been committed to demonstrating professionalism, empathy, and open-mindedness during this capstone project and have created memorable experiences. I thank Debbie Kaye and her staff for their never-ending support. I anticipate seeing the success of the academy and its students in the near future.

Next, I want to thank the esteemed staff of the UNLV Occupational Therapy Doctoral Program for your consistent support, understanding, and openness. I want to thank Dr. Christina Bustanoby, Dr. Jonathan Legarte, Dr. Kaitlin Ploeger, and Dr. Jose Pablo Castillo for your never-ending efforts to help me through my academic and personal life. Your contributions have made me confident as I progress toward my professional career.

Finally, I thank my significant other, Amber Joy Fagaragan, and my son, Alijah Julian “Juju” Amigo, for your endless love and support throughout my academic journey. You have been my motivation to perform my best at all times. Thank you for teaching me resilience and perseverance, transforming me into who I am today. You are why I work tirelessly to become the best student, partner, and father I can be. I am excited about our future and look forward to taking the next steps as a family.

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Occupational Therapy Student Fieldwork in a Private School

The educational system provides opportunities to prepare students for adult roles associated with work and community life. Over the recent years, educational reform in the United States has focused on making this goal an obligation in all schools (Cochran-Smith, 2020). To uphold this commitment, greater academic rigor, increased pressure to demonstrate adequate behavior, and emphasis on guiding students for career readiness have led to continuous changes in the educational landscape. In addition, students are also expected to develop adequate problem-solving, interpersonal, and intrapersonal skills alongside meeting academic demands. Meeting these objectives may be stressful for some students, and they may need help in the classroom setting, leading to possible challenges in other areas of life.

Occupational therapy (OT) is one of the many professions that can contribute to an individual's success in the school environment by maximizing their participation and performance as a student at any grade level. Furthermore, OT services can address many other factors contributing to students' success as they develop into young adults. For example, within the school system, many children can display inappropriate behaviors in response to stress and may struggle with social participation (Ball, 2018). The inability to build relationships with other students may cause intrinsic emotions to arise and become displayed through inappropriate actions, which may impede their educational progress. According to the Bill & Melinda Gates Foundation (2012), a national survey was conducted among over 10,000 teachers, ranging from pre-kindergarten to 12th grade, and results revealed that 70% of participants concurred that in-school behavioral support from psychologists and therapists, including OT, had a solid or powerful impact on student achievement.

The OT profession has long been involved with educational systems, providing therapeutic interventions to assist students in reaching their academic goals. Ball (2018) highlighted the emergence of school-based OT dating back to as early as 1975 with the passing of the Education for All Handicapped Children Act (EHC), which is now reformed into the Individuals with Disabilities Education Act (IDEA). IDEA promotes that all children have the right to an education and access to mandated related services, including OT, which later led to the No Child Left Behind Act (NCLB) that created broader opportunities for OT services to be used by schools to benefit students with and without disabilities. Furthermore, the Every Student Succeeds Act (ESSA) replaced NCLB and mandated that occupational therapists (OTs) are to be included as specialized instructional support personnel (SISP). As OTs take on the current role of SISP in schools, they are involved in planning and implementing new programs and school-climate initiatives and assisting with any of the school's educational needs to optimize student learning (Ball, 2018). History has proven that OT services significantly contribute to academic success, and legislative mandates have backed the profession. More importantly, the research has demonstrated that school-based OT can increase academic performance among students who receive services.

There has been a continuing growth in studies examining the benefits of school-based occupational therapy programs. However, limited research primarily focuses on the private school setting. The current OT literature highlights providing services to students within public schools, where resources and cultures may seem different than those of private settings. Moreover, funding, legislation, and overall culture supporting OT services are dissimilar. As a result, there is also a need for more educational resources to help OT students perform clinical

fieldwork experiences in such areas due to the overall low employment of OTs in private school-based environments (US Bureau of Labor Statistics, 2022).

The initial phases of integrating OT services within a school may present challenges, especially for the OT students assigned to the new fieldwork site, where increasing advocacy for OT may be required. Therefore, this capstone aimed to create a fieldwork manual that guides OT students through their level I and II fieldwork assignments with professional expectations, ethical delivery of client-centered treatment, school-based protocols, and collaboration with all educational stakeholders and families at Cornerstone Christian Academy (CCA). This religious-based private school now serves as a role-emerging practice area. Such opportunities can maximize the benefits for potential students needing OT services and create more opportunities for OT students to practice as future healthcare practitioners. This capstone project promotes program development according to the standards of the Accreditation Council for Occupational Therapy Education (ACOTE, n.d.). Lastly, the capstone experience addressed the American Occupational Foundation's (AOTF) research priorities to facilitate reciprocal opportunities between doctoral students for practical implications and private school students for holistic gain (AOTF, n.d.).

Statement of the Problem

Nationally, approximately 17,000 occupational therapy practitioners are employed in elementary and secondary schools (US Bureau of Labor Statistics, 2022). Nevada currently hosts roughly 800 active occupational therapy (OT) practitioners, and approximately 17% are employed within educational institutions. (Nevada Board of Occupational Therapy [NBOT], 2020). Despite being ranked the fourth highest primary employment setting, only 5% of OT practitioners represent the private school-based total. As a result, this would rank as the third lowest setting, posing as an underserved community. Minimal advocacy and emphasis on the desire for OT services within these private schools can prevent students from receiving potential therapeutic interventions that may enhance their academic experience. The critical issue is that while school-based OT programs serve as a possible bridge to academic success, the difference in funding between the two school systems presents a daunting barrier to occupational justice.

Despite Nevada having over 130 private schools, less than 10% of those schools offer OT as educational support services (NBOT, 2020). Although OT services are more predominantly present in public schools, current private programs such as The Alexander Dawson School, Henderson International School, and The Meadows School consist of OTs providing interventions to target holistic development. These schools heavily advocate for the role of OT services within the educational system. Although OT services have been steadily implemented in private schools, the recent impact of the COVID-19 pandemic has halted many OT students' fieldwork opportunities to maintain their attending students' safety and health. Opportunely, the OT department at UNLV has created a pathway for its OT students to become acclimated with private school-based therapy through fieldwork placements at CCA by allowing them to build rapport with school personnel, conduct assessments with attending students, and convey

feedback with teachers and parents. However, CCA has only recently begun promoting such therapeutic services, as they do not currently have OTs employed at their site. The site is now considered a role-emerging practice, as services were initially offered to the student body at CCA in the fall of 2023. Previously, students had completed fieldwork placements at CCA; however, it was evident that a manual was necessary to guide them in working with CCA's population and culture.

This led to the overall question:

Would developing an evidence-based fieldwork manual enhance the experiential learning process for occupational therapy fieldwork students at Cornerstone Christian Academy?

The essential issue was the need for evidence-based resources for OT fieldwork experiences in the private school-based setting. As a result, creating a fieldwork manual to guide OT students through their clinical experiences at CCA served as a viable resolution. The fieldwork manual would guide students in accomplishing objectives to help build practical and professional skills in a private educational academy. Additionally, the fieldwork manual would cultivate a relationship that provides opportunities for future OT students to enhance their clinical skills and advocate for OT in a role-emerging private school.

Definitions

Academic Fieldwork Coordinator (AFWC): coordinates and organizes the fieldwork experiences of OT students; oversees the educational experience of the fieldwork student and prepares the fieldwork educator in a supervisory role

Cornerstone Christian Academy (CCA): A religious-based private school in Las Vegas, Nevada, that serves students from preschool to eighth grade and strives for academic excellence while emphasizing the importance of Christianity.

Fieldwork: Practice-based learning experiences that integrate a student's academic knowledge into clinical practice

Fieldwork educator (FWEd): Healthcare professionals with at least one year of practical experience directly supervising students on-site during Fieldwork.

Fieldwork manual: An educational guide that is designed to address the policies, procedures, and expectations associated with the fieldwork site

Occupational therapist (OT): An entry-level graduate who has completed the National Board for Certification in Occupational Therapy to become a licensed and registered OT practitioner

Role-emerging: A site that does not host an active OT or the role of OT has yet to be solidified

School-based: Refers to services that are delivered within an educational setting

Self-efficacy: an individual's intrinsic belief in themselves to perform a task

Specialized Instructional Support Personnel (SISP): Include a wide range of professionals that provide services to support students in their academics

Literature Review

The literature review involved articles that discussed occupational therapy (OT) fieldwork experiences and OT services delivered in educational settings. The following terms were used during the online searches: “student” AND “fieldwork” OR “student”; “role-emerging” AND “occupational therapy” OR “school-based” OR “education” OR “primary school.” The databases used for the searches included the online databases of PubMed, Google Scholar, and the American Occupational Therapy Association (AOTA) research database. The inclusion criteria for both searches included articles within the past ten years.

The synthesis of literature included 17 articles, with four emphasizing the impact of COVID-19 on students and school-based health-related services, four concentrating on the role of school-based occupational therapy services, four highlighting fieldwork in a role-emerging practice area, and four covering how fieldwork manuals can assist OT students and the FWEd. From the literature review, four prominent themes emerged. The first theme was the role of occupational therapy in schools and its advantages to students’ academic achievement. The second theme was the benefits of school-based OT services. The third theme was the student perceptions of fieldwork placements in role-emerging practice areas and the comparison to traditional fieldwork settings. The final theme was the advantages of possibly utilizing a fieldwork manual during fieldwork experiences.

The Impact of COVID-19 and School-Based Health Services

The first section will focus on the impact of the COVID-19 pandemic and how it affected students’ learning processes (Mahmoodi et al., 2023; Viner et al., 2022). This section will discuss the importance of school-based health services and the benefits of seeking such services (Denny et al., 2018; Kranz et al., 2022). The first article will highlight the impact of COVID-19

lockdown measures on students' psychological well-being. Then, it will transition into the pandemic's effect on students' behavior during lockdown. Next, the third article will cover school-based health services addressing mental health in students. Lastly, the fourth article will discuss the changes in service delivery of school-based health services before and during the COVID-19 pandemic.

As educational institutions slowly recover from the COVID-19 pandemic, the broad range of effects still lingers today, most notably the association between the social lockdown measures and the overall impact on school-aged children and adolescents. Viner et al. (2022) conducted a systematic review to investigate the possible association between school closures during the pandemic and its effect on mental health and well-being in children aged 0-19. The researchers included 36 studies that sought after data relative to the unaddressed psychological needs of the target population during the COVID-19 lockdown. Viner et al. revealed adverse changes in each of the three categories. First, mental health symptoms increased, with the data revealing significantly higher rates of student anxiety and depression during the lockdown. Second, increased screen time and sedentary behavior led to an increase in obesity rates in school-aged children and adolescents. Lastly, sleeping patterns were heavily affected, leading to an increase in insomnia and fragmented rest periods. A limitation of this study is the inclusion of studies that were solely from the first wave of the pandemic, which included various ranges of closure durations, which may not fully capture the long-term effects on mental health, health behaviors, and well-being. Despite this, the study by Viner et al. (2022) sheds light on the salience of monitoring the socio-psychological needs of school children and adolescents as society continues to recover from the COVID-19 pandemic.

Issues in behavior are another result of the prolonged lockdown during the pandemic. Mahmoodi et al. (2023) conducted a cross-sectional study to determine the predictors affecting behavioral and emotional problems in students aged 6-12. The study participants included 322 mothers of elementary school-aged children for three months in 2021, where the researchers gathered survey data on socioeconomic status, depression rates, anxiety levels, amount of stress, and measured behavior through the Rutter Children's Behavior Questionnaire (RCBQ). The results revealed that 17% of school-aged children had behavioral problems during the coronavirus pandemic. There was also a significantly higher number of mothers who reported experiencing anxiety and depression during the pandemic due to feelings of uncertainty when dealing with their children's behavioral issues. Limitations of the study include that the survey is accessible online only, behavioral symptoms are based on the mothers' opinions, and additional factors affecting behavior during the pandemic are not considered. The study by Mahmoodi et al. (2023) demonstrated that students and their families may have experienced difficulties dealing with the children's behavior, suggesting additional help to treat the behavioral symptoms.

School-based health services can address multiple aspects of a student's well-being that help guide them toward academic achievement. These services can include an array of health professionals who specialize in an area that can promote school engagement and student success. As the study by Viner et al. (2022) discussed the association between school closures during the COVID-19 pandemic and the effects on health and well-being in students, a cross-sectional study by Denny et al. (2018) described how school-based health services can have a positive impact on the often-overlooked mental health needs of children and adolescents. The researchers utilized findings from 8483 student surveys from 90 different schools regarding mental health and well-being indicators and the utilization of their school's health services. The results revealed that

depressive symptoms, suicidal thoughts, and total difficulties were common psychological issues that students were facing. Students who actively sought health services during school reported a significant increase in their mood and participation in educational activities. However, only half of the participating schools consisted of an on-site health professional, while some schools only provide first-aid care. The surveys were self-report questionnaires, which may have risked the bias of under- or over-reporting on the evaluation of one's mental health. Nonetheless, this study depicts the need for school-based health services to treat a broader range of underserved students who may benefit from their positive impacts.

Although the previous study has demonstrated the benefits of school-based health services in addressing mental health, the COVID-19 pandemic may have also impacted the service delivery of school-based health teams and their effects on student academic performance. Kranz et al. (2022) conducted a web-based survey with 767 public elementary schools to examine the changes in school-based health services and the needs of students before and during the pandemic. The survey included questions about screenings, mental health services, dental services, immunizations, and occupational and physical therapy. The researchers found that the responding schools reported a significant decrease in providing school-based health services during the 2020-2021 school year compared to before the pandemic. Additionally, there was a substantial increase in the concerns about students' mental health from 15% before the pandemic to 27% during the pandemic. The results also revealed that schools reported two crucial factors regarding the delivery of school-based services: support from school staff and guidance about how to deliver health services following the pandemic lockdown safely. A limitation of the study is that the participating schools only resided in Virginia. Additional limitations include self-report bias, possible misinterpretation of survey questions, and the fact that the survey was

conducted in May 2021, which may not fully capture the full impact of COVID-19 on school-based health services. The study by Kranz et al. (2022) reveals how the pandemic has also altered school health service delivery models, thus further affecting student academic performance.

To conclude, the COVID-19 pandemic has affected students mentally, behaviorally, and academically (Denny et al., 2018; Kranz et al., 2022; Mahmoodi et al., 2023; Viner et al., 2022). School-based health services have helped improve the overall health and well-being of students who sought services (Denny et al., 2018; Kranz et al., 2022). However, the long-lasting effects of the pandemic may have created more barriers to academic achievement than ever before (Mahmoodi et al., 2023; Viner et al., 2022). As education systems strive to return to life post-pandemic, the importance of school-based health services must not be overlooked and should be advocated to help students in need.

The Role of Occupational Therapy in School-Based Settings

The second section focuses on occupational therapists (OT) in school-based environments, as they are among the many health services that can contribute to student academic success. OT in schools can help promote social participation, self-regulation, mental health, and motor skills that can lead to educational achievement (Ansari & Rizvi, 2023; Chan et al., 2017; Watroba et al., 2023; Watt et al., 2023). The first article will discuss OT interventions that can help students with difficulties in sensory processing during school. Then, it will move to OT's role in developing social skills. The third article will cover how OTs can help students with specific diagnoses. Finally, the fourth article will discuss how OTs can use interventions to improve mental health in elementary students.

Dysfunction in sensory processing can make it challenging for students to succeed in school. OTs can address these issues through different school-based sensory interventions. Watt et al. (2023) performed a systematic review to explain the existing research that supports sensory-based interventions in school-based OT services. Nineteen articles were included in the systematic review. The researchers discovered two prominent themes that revealed positive results from sensory-based interventions. First, sensory-based interventions demonstrated increased effectiveness in managing classroom behaviors such as in-seat, on-task/off-task, and risky behaviors through self-regulation and environmental modifications to decrease distractions. The second theme identified was the impact of sensory-based interventions on classroom engagement. The articles included cognitive strategies, fine motor tasks, and functional role play as interventions to facilitate increased social interactions with peers. Limitations of the study include a male-dominant sample, a small sample size, and the inclusion of only English articles, which can all limit the generalizability of the findings. Nonetheless, sensory-based interventions can be an effective tool that school-based OTs can utilize and individualize for any student who requires help in the classroom.

As Watt et al. (2023) discovered articles that included interventions that promote social interaction, it is essential to note that social engagement is crucial to child development. Ansari and Rizvi (2023) conducted a systematic review to capture the scope and existing evidence regarding school-based OT interventions to promote social capabilities among students. A total of 24 articles met the inclusion criteria. Different methods such as yoga, mentor assistance programs, sporting activities, and animal care in the classroom served as interventions that increased psycho-social-emotional development in students. The selected studies revealed that school interventions positively promoted students' social capabilities through improved self-

regulation and participation in social situations. A limitation of the study is the inclusion of articles from varying countries, which may consist of less applicable interventions in different settings. Despite this, Ansari and Rizvi (2023) demonstrated that OT services can assist students in developing their social identities and social interaction skills.

School-based OT interventions can also be tailored to assist students who are clinically diagnosed with attention deficit hyperactivity disorder (ADHD) and autism spectrum disorder (ASD), which are two of the most prominent diagnoses among children ages 3-17 years old (CDC, 2022). Watroba et al. (2023) conducted a systematic review aiming to synthesize the best available research regarding the effectiveness of school-based OT interventions on school skills among children with ADHD and ASD. The systematic review included 13 studies divided into two categories by diagnosis. School-based interventions for children with ADHD included exercises such as mindfulness, executive function training, and weighted vests for sensory activities. The interventions revealed positive responses in cognitive abilities, processing skills, and social interaction skills. As for the children with ASD, the researchers found a significant increase in social interaction skills (Watroba et al., 2023). One limitation of the study was the sample size of the included articles, which may affect the statistical power and the generalizability of the results. Despite this, it does not overshadow the positive outcomes that school-based OT services can generate within this population. Moreover, as OT is equipped to deliver holistic care to clients, a significant area that needs to be addressed is mental health within the students.

OTs can also address mental health within school-based services. Chan et al. (2017) performed a systematic review to investigate and better understand the effects of the mental health interventions that OTs implement with elementary students in school-based settings. A

total of 15 articles were included for review. The researchers have found a significant increase in mental health interventions that assisted in academic performance and an overall rise in occupational engagement during school. Psychotherapy was presented as the most prominent form of intervention throughout the studies. Although a limitation of this study only focused on the elementary population, which can limit the generalizability of the findings, it still strengthens the argument for school-based OTs being versatile in targeting different areas to maximize the academic experience for all students.

After reviewing the literature, consistent themes were identified within OT's role in the school-based environment that contributed to students' academic success (Ansari & Rizvi, 2023; Chan et al., 2017; Watroba, 2023; Watt et al., 2023). Moreover, the literature reveals the flexibility with which OT can address multiple areas to assist with student needs. The studies have shown that the role of OT can help improve students' skills that will later translate to skills needed in adulthood (Ansari & Rizvi, 2023; Watt et al., 2023). However, the literature either only discussed OTs in public schools or did not specify details, leaving a gap in the literature that does not identify the positive impact of OT, specifically in private schools. Further studies are required to define the role of OT within private school-based settings.

Benefits of Fieldwork in Role-Emerging Practice Areas

The third section is focused on how the development of a fieldwork manual in a role-emerging practice would not only assist students and the academic fieldwork coordinator (AFWC) in meeting the objectives of the fieldwork experience but would also provide students the opportunity to become liaisons of their respective profession, increase their overall self-efficacy, and groom their skills in becoming entry-level OT professionals (Bolton & Plattner, 2020; Clarke et al., 2014; Keptner & Klein, 2019; Lau & Ravenek, 2019; Mattila & Dolhi,

2016). The first article will discuss the students' perspectives on fieldwork placements in role-emerging practice areas. Then, it will transition to the different perspectives between teachers and OTs on school-based services and how it creates an opportunity for teachers to learn more about the profession. The third article will discuss the importance of the decision-making process for OT students during fieldwork and how role-emerging areas can affect their perspectives. Next, the fourth article will discuss students' experiences with limited direct supervision in a non-traditional fieldwork setting. Lastly, the fifth article will cover how role-emerging fieldwork placements can help develop a professional identity.

Understanding the students' experiences is imperative to determine the benefits and challenges of conducting experiential learning in role-emerging areas. Lau & Ravenek (2019) conducted a literature review through scoping review methods to capture the perceptions of OT students who have previously conducted fieldwork in a role-emerging area. A total of 30 articles were identified through the literature search, and two themes emerged: opportunities and challenges. Some common challenges when completing fieldwork in a role-emerging practice area include a lack of structure and support, defining a professional role, and a high amount of responsibility. On the contrary, the results revealed more student opportunities, such as personal and professional development, greater independence and autonomy, increased self-efficacy, and advocacy for the profession. Limitations of the article include the inclusion-exclusion criteria being too narrow, only one of the authors conducting the literature review while the second author solely provided topic supervision and guidance related to methods and interpretation of literature, and potential interpretation bias from the researchers. Nonetheless, the opportunities from the literature review paved the way for other OT students to develop further into influential healthcare professionals.

Although recent studies have shown that OT interventions are effective in assisting students in reaching their academic goals (Ansari & Rizvi, 2023; Chan et al., 2017; Lappalainen & Ruotsalainen, 2023; Watt et al., 2023), knowing OT's actual role within a school's system still lingers as a challenge for the majority of educators. Bolton & Plattner (2020) conducted a 44-item closed-ended qualtrics survey between 39 teachers and 48 OTs to gather data on their perspectives on their knowledge about the OT profession and the value of OT services. According to the results, when teachers were asked about the OT role in school-based practice, only 56% of teachers indicated an understanding of what OT services can be provided in the school. In comparison, 44% showed a "kind-of" understanding of OT services. In addition, 96% of the teachers indicated they highly value or value OT services in schools; however, only 60% of OTs feel that teachers genuinely value their services. Limitations of the study include a small sample size, the majority of participants residing in a particular state, and responses that different school environments may have influenced. While the results of this study demonstrate a common disconnect between OT professionals and educators, this presents an opportunity for OT students to translate their acquired comprehension through coursework and educate specific stakeholders while on fieldwork. Within a role-emerging practice area, students can become strong advocates for the profession by informing others about OT's services and its many benefits.

Decision-making as a clinician is a robust process, and students must be properly educated to avoid making unethical choices during treatment. Role-emerging practice areas can provide students with independence where they can become self-reliant. Mattila and Dolhi (2016) interviewed five OT students and gathered their details about their fieldwork experiences in a non-traditional or role-emerging setting. The interviews were 45-60 minutes long and consisted of open-ended questions to retrieve the most relevant information. The qualitative

analysis also utilized relative information regarding fieldwork in the student's journal entries. The researchers found common themes for benefits, including the transformative process that occurs in students who participate in these placements. Students reported a change within themselves, both personally and professionally, that impacted their desired practice setting in the future. As students progressed through their fieldwork, they became empowered by the knowledge acquired through self-directed learning, and making appropriate ethical decisions became second nature in time. The study is limited because the responses were gathered from only five students, all with homogeneous characteristics, and the students worked closely with the researchers as part of their program development, thus generating the possibility of preconceived bias. However, the study presents how the intrinsic transformation that occurs in students during fieldwork can increase their autonomous decision-making skills while working in a nontraditional or role-emerging setting.

In light of the decision-making process, OT students must also be confident in their clinical reasoning skills to become ethical practitioners. Keptner and Klein (2019) conducted a multiple, qualitative case study with nine OT fieldwork students to describe their experiences during a faculty-led fieldwork placement in a non-traditional setting. The researchers facilitated a collaborative learning model to seek the students' perspectives on receiving less than full-time direct supervision during fieldwork and how the interactions between their peers and colleagues influenced their experiences. Students were directed to log journal entries and photovoice entries that were meaningful to their experiences, as long as the photos did not include the children who served as clients. The researchers also conducted field notes and a post-fieldwork focus group. After synthesizing the data, Keptner and Klein revealed that although students reported a sense of uncertainty with limited supervision during fieldwork, the students also reported they were

able to practice more self-reflection, perform more interventions with self-direction, increase their communication skills when working with colleagues, and develop more confidence in their clinical skills. Limitations of this study include the small sample of the nine OT students, potential bias from one of the researchers as she served as the fieldwork supervisor, and the case study design focusing on a faculty-led fieldwork experience that may not be fully representative of all OT students or programs. Despite the limitations, the uncertainties that students can face in a non-traditional or role-emerging setting can propel them to be more independent and self-confident in their skills, which will later enhance personal and professional growth.

As professional growth becomes a trend in role-emerging areas (Keptner & Klein, 2019; Lau & Ravenk, 2019; Mattila & Dolhi, 2016), establishing one's professional identity during fieldwork is the precursor to actual professional practice following graduation. Clarke et al. (2014) used interpretative phenomenological analysis to develop a deeper understanding of students' experiences and ascribed meaning to their assigned role-emerging placements. The researchers conducted semi-structured interviews with five OT students to explore their lived experiences and gain insight into the benefits of fieldwork in role-emerging practice areas. As students were aware of the changes in themselves during their experiences, common themes included the development of their "new" self, which specified increased maturity and confidence; having a more profound belief in the OT profession, including seeing clients in a different light; and becoming a positive influence to their clients. The homogeneity of the sample presents a limitation, as well as the retrospective approach to the interview that relied on the participants' memories, which may not have been entirely accurate. Overall, role-emerging fieldwork placements can help develop OT students into the professionals they are trained to be.

To conclude, role-emerging areas of practice can provide multiple benefits for OT students. New or nontraditional areas can instill self-confidence, develop professional growth, and create opportunities to further educate others on the profession (Bolton & Plattner, 2020; Clarke et al., 2014; Keptner & Klein, 2019; Lau & Ravenek, 2019; Matilla & Dolhi, 2016). As the OT profession grows, different areas will continue to develop for OTs to help underserved populations. OT students should embrace a fieldwork position in these role-emerging areas to develop autonomy as a future clinician, integrate OT into new areas, and continue to build clinical skills.

Benefits of a Possible Fieldwork Manual

Fieldwork provides OT students with an opportunity to bridge the gap between didactic and clinical training by applying their knowledge in practical settings. However, when they do not seem confident in their abilities to transfer that knowledge into clinical applications, a barrier is drawn that impedes students from succeeding during fieldwork. The final section of this literature review will discuss how a fieldwork manual can be designed to help students increase their overall self-efficacy, further develop their skills as a future clinician, and lighten the load for the FWEd as well (Andonian, 2017; Forfa et al., 2022; Greiner, 2015; Meyer & Hunley, 2022). The first article will discuss the importance of self-efficacy in students during fieldwork. Then, the second article will describe how a fieldwork manual can benefit the FWEd in addition to OT students. Next, the third article will delve into the common barriers that OT students face during fieldwork and a possible solution. The fourth article will discuss how an educational intervention during fieldwork can increase student self-efficacy overall.

Self-efficacy is a salient component that can be found throughout the fieldwork experience. When considering role-emerging areas of practice, it is essential to recognize that the

FWEd can experience challenges as a mentor. Still, it can be equally challenging for students as they try to uphold the expectations that the FWEd can place on them. Andonian (2017) conducted a study that examined the relationship between fieldwork experiences and students' perceived self-efficacy. The study consisted of 306 OT students who participated in the Student Confidence Questionnaire (SCQ) to gather insight into the students' perceptions of their self-efficacy levels during fieldwork. The results revealed that transitioning from being a student to a clinician may be challenging as the expectations quickly shift. Students' self-efficacy was also reported to be contingent upon different elements, such as the relationship with the FWEd, the frequency of feedback and how it is conveyed, and overall preparedness. Students who felt ill-prepared when beginning their clinical rotations reported significant levels of self-doubt, thus undermining their ability to meet expectations. On the contrary, students who reported a sufficient level of readiness reported significantly higher levels of self-efficacy throughout fieldwork. Due to the small sample size of this study, further studies are needed to examine how comprehensive preparation can influence student self-efficacy during OT experiential learning opportunities. Developing a fieldwork manual for OT students would help them feel better prepared, thus increasing their overall self-efficacy during their clinical experiences.

Creating a fieldwork manual would not only be beneficial to the students but also support the FWEd. Forfa et al. (2022) developed a 35-question descriptive online survey to further understand OT practitioners' perceptions towards the implementation of non-traditional models of supervision, such as the 1:2 model, 2:1 model, and the group model, during fieldwork placements for OT students. The researchers recruited 304 OT practitioners through convenience, snowball, and purposive sampling. The results revealed that 48% of the participants had never used a non-traditional supervision model, as 99.6% of practitioners

preferred having the traditional 1:1 model. The participants reported multiple barriers to instituting non-traditional supervisory models, such as restricted time, lack of resources, and lack of education relative to the fieldwork site. Due to the sampling methods, there may be a possibility of response bias, limiting the findings' generalizability. In addition, the survey was administered online, which may have excluded possible participants who do not have access to or are not comfortable with electronic surveys. Despite this, a potential solution to the challenges presented can be the development of a fieldwork manual. As role-emerging practice areas usually consist of a non-traditional supervision model, a fieldwork manual can provide information relative to the placement site and save time for both parties as it may answer any questions about fieldwork.

Greiner (2015) wanted to understand further OT students' perspectives on the distinct enablers and challenges during OT fieldwork education. The researcher conducted a qualitative study using an inductive grounded theory approach to gain a better understanding through the fieldwork experiences of 29 OT students. An open-ended 10-item online survey was administered to the students, having them elicit their specific responses. The study's results discovered many facilitators representing positive experiences during fieldwork placements. However, it is essential to note the reported barriers and the opportunities for solutions moving forward. The common themes of perceived barriers to learning that emerged during fieldwork include lack of communication with the FWEd, lack of confidence in one's own knowledge and abilities, lack of up-to-date resources for best practice, frequent quizzing from the FWEd, and being too quickly involved without proper preparation. This study is limited by its inclusion of students from four different universities, which may affect the generalizability of findings. However, data was gathered until saturation was reached, and student responses appeared

consistent across the participants. The listed barriers to optimal learning during fieldwork education can be resolved with a supplementary, updated resource to better guide OT students through their experiences. This further calls for a fieldwork manual during the experiential learning process.

Providing an educational tool for OT students during fieldwork can set them up for success. Meyer & Hunley (2022) conducted a quantitative quasi-experimental study with 16 occupational therapy assistant (OTA) students to determine if an educational module would increase perceived self-efficacy and confidence during fieldwork. The researchers utilized the Student Confidence Questionnaire (SCQ) as a pretest before the intervention and as a post-test following the intervention to gauge the student's self-perception levels after receiving an educational module during fieldwork. The educational intervention was conducted in three phases: first, the introduction phase included orientation about the fieldwork site, goal development, and group discussion; the second phase included self-reflection through personal journal entries for six weeks, and further education on the applicable interventions for the specific fieldwork site; the third phase consisted of group discussions reflecting upon the changes between their pretest and post-test findings of the SCQ and how to feed-forward these changes into the next fieldwork assignment or future practice. The results indicated that the implementation of an educational intervention that focused on self-reflection, professional competence, and background information on the fieldwork site significantly increased perceived self-efficacy in the post-test for all participants. The study's limitations were the small sample size, the exclusion of a control group to indicate the specific impact of the educational intervention, the utilization of a self-report may be subject to response bias, the exclusion of OT students, and the research did not examine any long-term effects of the educational intervention

beyond the fieldwork experience. Nonetheless, the study by Meyer and Hunley (2022) demonstrates how an educational tool during the experiential learning process can enhance students' overall self-confidence in their abilities as a clinician, furthering the need for fieldwork manuals during fieldwork assignments.

To conclude, many opportunities exist for a fieldwork manual to be implemented in fieldwork placements and benefit all stakeholders. Having such a resource can become a valuable tool that students can utilize if they are unsure about any aspect of the fieldwork experience, thus increasing their confidence in their skills as future entry-level OTs (Andonian, 2017; Greiner, 2015; Meyer & Hunley, 2022). A fieldwork manual can also alleviate the burden for the FWEd of constantly attending to the students when they are limited on time and are only sometimes present (Forfa et al., 2022). As role-emerging practice areas continue to develop in OT, fieldwork manuals can be a valuable resource for the OT student, the FWEd, the fieldwork site, and the respective OT educational institution.

Discussion

The literature identifies evidence backing the intended development of a fieldwork manual for Cornerstone Christian Academy (CCA). The global impact of COVID-19 has heavily affected educational systems, where OTs can begin or continue to guide students through learned experiences as life resumes from the pandemic. School-based OT interventions have been shown to address different aspects of the student to increase academic performance. With CCA serving as a role-emerging area of practice, the literature has also identified the benefits of conducting fieldwork experiences in such places and how a fieldwork manual can enhance the experience overall.

The current knowledge gap includes the absence of studies centrally on OT student fieldwork experiences, especially within the private school-based setting. The lack of current evidence to describe fieldwork experiences in private institutions creates a barrier to underserved students. Additionally, there is a barrier to forming potential relationships with other organizations that may strongly need OT services, thus limiting fieldwork opportunities for OT students, especially within role-emerging practice areas. Future studies should include the development of fieldwork manuals within private educational institutions to promote OT students receiving optimal experiential education while also delivering OT interventions to attending students in need to maximize their academic potential.

Statement of Purpose

AOTA's (2017) Vision 2025 statement reads, "Occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living." School systems are an area of practice in which OTs can positively impact students' health and well-being. The evolution of OT services in the school setting has been backed by continued legislation mandates such as the Individuals with Disabilities Education Act (IDEA), the No Child Left Behind Act (NCLB), and the Every Student Succeeds Act (ESSA) (AOTA, 2015). These educational reforms have led to solidifying the role of OT in schools to assist students with disabilities and typically developing students for optimal learning and health promotion.

However, there has been a lack of emphasis on instituting OT services within private schools due to differences in funding allocation. As public schools receive local, state, and federal funding, private schools generally do not receive any government funding but through student tuition, private grants, and endowments (Barrington, 2022). This results in fewer private schools offering accommodative services such as OT. Not only does this limit the opportunities for attending students to participate in beneficial therapeutic services, it also restricts current occupational therapy doctoral students (OTDs) from effectively completing fieldwork opportunities in such underserved locations. As AOTA (2017) is focused on maximizing the holistic well-being of "... all people, populations, and communities", private school students should be considered one of those potential communities. With Cornerstone Christian Academy (CCA) in Las Vegas recently partnering with UNLV, a new path has been developed for the university's occupational therapy program to complete fieldwork assignments at CCA without

any costs to the private institution, essentially creating a mutually favorable situation for both parties.

Several discussions were held with OT students about practicing in role-emerging areas during this capstone project. It was found that most OT students may find such areas stressful to work in due to the absence of an established program structure and a lack of support from a licensed OT. With CCA now serving as a role-emerging area of practice, OTD students would likely require direction and instruction when practicing at a facility with a newly developed OT program. Therefore, this capstone provided an opportunity to create a fieldwork manual that can advance the professional skills and overall fieldwork experience of OT students at CCA and to educate the staff members about OT's role within their school. The objectives of this capstone project are as follows:

1. Create an accessible, evidence-based fieldwork manual to increase overall performance during fieldwork,
2. Educate the school's educators about the value of OT and its potential benefits,
3. And identify challenges and opportunities for the fieldwork manual to benefit future students.

Anticipated outcomes include:

1. Increased understanding of guidelines and protocols when conducting fieldwork at CCA,
2. Increased self-efficacy of OT students during fieldwork experiences,
3. And establishing an effective, collaborative relationship with the teachers at CCA.

Theoretical Frameworks

This capstone project was grounded using Kolb's Experiential Learning Cycle (Kolb, 1984) and the Systems Experiential Learning Framework, otherwise known as the S.E.L.F. approach (Delbert et al., 2020). These two theoretical frameworks were the foundation for creating the manual and assisted in gathering relevant data for future fieldwork students. Both models were essential to the capstone experience at Cornerstone Christian Academy, as the role of occupational therapy has yet to be solidified. Without the constant presence of an OT as a FWEd, students will use the fieldwork manual to better prepare and guide them through their experiences.

David Kolb, an American educational psychologist whose work focused much on the experiential learning of others, believed that learning must be grounded in experience (Kolb, 1984). He theorized that learning requires acquiring abstract concepts that can be applied in different situations. In essence, knowledge is developed through the transformation of experience. He created a four-stage, integrated process where each phase is mutually supportive and is the foundation for the next step. The four steps include concrete experience, reflective observation, abstract conceptualization, and active experimentation (Kolb, 1984) (see Appendix A). According to Kolb (1984), effective learning only occurs when the learner executes all four stages.

Kolb's Experiential Learning Cycle demonstrates the process students will endure when referring to the fieldwork manual at the fieldwork site. In addition, students can begin at any cycle phase without a designated starting point. For example, students can start with a reflective observation on the first day of fieldwork. Next, they will move on to abstract conceptualization, where students can refer to the fieldwork manual for further guidance on certain elements.

Afterward, active experimentation can include students formulating a plan to execute during the next opportunity. Finally, concrete experience can be the phase where students implement their plan through the observations and conceptualizations they have made.

The Systems of Experiential Learning Framework (S.E.L.F.) includes the Accreditation Council for Occupational Therapy Education (ACOTE) standards within the development process for a fieldwork manual (Delbert et al., 2020). The S.E.L.F approach was the basis for developing a fieldwork manual to help bridge academic coursework to real-world practice. This approach is based on systems theory and educational learning theories, which are imperative to deliver beneficial outcomes for student professional growth during experiential learning (Delbert et al., 2020). The S.E.L.F. approach transforms learning to meet the objectives of the occupational therapy program, its students, and other potential stakeholders.

The S.E.L.F. approach to the manual writing process was centered around five core strategies: plan, design, develop, write, and evaluate (Delbert et al., 2020) (See Appendix B). While planning, the entire framework for the writing process by establishing the intended audience, the manual's objectives, and the evaluation plan used in the last phase. The design phase included formatting the information and how it would be accessible to the target audience. The development phase incorporated policies and guidelines to prevent unwanted or unprofessional behavior and the consequences of improper conduct. The writing phase entailed the initial drafting of the manual. Lastly, the evaluation phase included the participants taking a short quiz and a feedback questionnaire to ensure the manual's unity with curricular outcomes and the overall clarity of the material presented. This approach assisted in developing a fieldwork manual that will prepare students for fieldwork expectations and mitigate potential problems during the experience.

Methodology

Fieldwork Site and Target Population

Cornerstone Christian Academy (CCA) was selected as the fieldwork site for the capstone project. CCA was founded in 2001, and the Tykes Preschool was launched in 2003. It is a religious-based private school that hosts children as early as 18 months up to the eighth grade. With a school-wide theme of “excellence is everything,” their vision is to encourage the whole child's development by engaging the student’s spiritual, academic, and physical growth. With relentless efforts by the UNLV OT faculty team, they have gained a partnership with the academy to allow OT students to conduct level I and II fieldwork experiences on the school grounds with the attending students at CCA. Since this capstone did not collect identifiable information, Institutional Review Board (IRB) approval was not required to gather participant survey data.

Preliminary contact was made during a meeting with the principal of CCA, Debbie Kaye, and the Middle School Dean, Kathy Yohner, on July 12, 2023. During this meeting, the goals for the capstone project were discussed, and Debbie Kaye approved to conduct the capstone experience at the site. A second meeting occurred on September 23, 2023, via virtual conference with Debbie Kaye to inquire about the school’s background information and its sources of funding. The memorandum of understanding (MOU) (see Appendix C) and the weekly supervision log (see Appendix D) described the entire capstone experience. The documents were reviewed by Debbie Kaye and Dr. Christina Bustanoby, with the latter signing the MOU following the review.

The capstone project was deemed a descriptive study, with the target population of future OT students placed on level I and level II fieldwork experiences at CCA. As Cornerstone

Christian Academy serves as a role-emerging area, the role of OT has yet to be fully understood by its stakeholders, thus further emphasizing the need to educate school personnel about the value OT brings and to enhance the overall fieldwork experience for OT students. Although the intended audience for the fieldwork manual was OT students, select staff members from CCA and the UNLV OT department also served vital roles in the development process.

Participants

The fieldwork manual will primarily assist future OT fieldwork students conducting level I and II fieldwork experiences at Cornerstone Christian Academy. Additional users of this manual may include the school's staff members and the academic fieldwork coordinator (AFWC) if necessary. Participants were chosen from UNLV OT students who previously conducted at least a level I fieldwork experience at CCA. Select faculty members at CCA and the UNLV OTD program assisted with the pertinent information and organization of the fieldwork manual.

Ten UNLV OT students who completed fieldwork at this site contributed to the development process based on their firsthand experiences navigating their clinical rotations with limited guidance. Fifteen CCA staff members also assisted in implementing procedures and guidelines that OT students must follow when working with attending students. The UNLV AFWC helped to ensure the fieldwork manual met the university expectations and ACOTE standards. Lastly, a visiting assistant professor from the UNLV OTD program was selected to align the manual with curricular outcomes and site relativity.

Table 1*Participant Characteristics*

Participants	<i>n</i>	Characteristics
OT Fieldwork Students	10	<ul style="list-style-type: none">❖ Second- and third-year OT Students from UNLV❖ Have completed at least one Level I fieldwork experience at Cornerstone Christian Academy
UNLV OTD Program Faculty Members	2	<ul style="list-style-type: none">❖ One Academic Fieldwork Coordinator (also served as the Site Mentor) with four years of experience❖ One Visiting Assistant Professor with two years of experience
Cornerstone Christian Academy Staff Members	15	<ul style="list-style-type: none">❖ One principal with five years of experience at CCA❖ One assistant principal with three years of experience at CCA❖ One middle school dean with six years of experience at CCA❖ Two registered nurses with at least three years of experience at CCA❖ Two security officers with at least two years of experience at CCA❖ Eight academic teachers who referred their students to OT

Note. The teachers who participated in the feedback questionnaire were all full-time positions, and substitute teachers were excluded from the study; (*n*) represents the sample size.

Phases of Developing the Fieldwork Manual

The five phases of the S.E.L.F. approach guided the formation of the fieldwork manual: plan, design, develop, write, and evaluate (Appendix B). With each phase, it guided the necessary steps to take when creating each section of the manual. All phases consisted of strategic planning before implementation occurred. Before the fieldwork manual was submitted for final publication, it was reviewed by the three different groups of stakeholders to ensure the accuracy and clarity of the information provided. Participants were given the final edited version of the fieldwork manual after extensive review sessions with the AFWC and CCA faculty members.

Phase I: Plan

In the planning phase for this capstone project, the target audience, objectives, and an evaluation plan were outlined to lay the foundation for the entire writing process. The target audience was aimed to include OT fieldwork students solely, but all who wished to be informed of OT's role within the private school-based setting were also thought to benefit from engaging in the manual. The main objectives were focused on creating a reliable resource to guide students through fieldwork and to ensure the content mirrored and respected CCA's culture. As a result, the fieldwork manual's outline included CCA's expectations for fieldwork students. It guided the development and implementation of clinical coursework that will center around the mission and values of Cornerstone Christian Academy. The chosen evaluation methods included a multiple-choice exam that tested the user's knowledge after reading the manual and two brief surveys to collect opinions and constructive feedback from the OT students and the CCA faculty. These initial components will help to set up the fieldwork students for achievement during the learning experience.

From past fieldwork experiences, I personally completed level I and II fieldwork at CCA. Level I fieldwork mainly consisted of observations, community collaboration with the school personnel, and completing course-assigned assessments with attending students at CCA. For Level II, I helped with the school-wide implementation of a social-emotional learning curriculum, the Zones of Regulation, and assisted with developing the OT program at the site. Both experiences provided further understanding of how OT students operated during fieldwork with limited supervision in a role-emerging practice area.

The planning phase required initial collaboration with all stakeholders. First, another meeting with Debbie Kaye was conducted to provide an overview of the program. In addition, this consisted of conducting a needs assessment with both the school's personnel and UNLV fieldwork students to help determine the contents that would be included in the fieldwork manual. Next, I participated in AOTA's online course *Educating the Educators* on January 12, 2023, which provided further education on the role of OT in school-based practices and the best ways to explain its benefits to school personnel. The online module helped describe OT's importance in the fieldwork manual.

Phase II: Design

The design phase allowed the opportunity to decide how the information in the fieldwork manual would be formatted. This included how the pages were structured and the contents included in the pages. A table of contents was also developed during this phase. In addition, the design phase also helped determine how the manual would be disseminated to the target audience, which was having students access the fieldwork manual online and printing out a hard copy. The layout of the fieldwork manual was designed for easy comprehension and user-friendliness for its readers.

After advisory discussions with the faculty mentor, further research was recommended to understand better how a proper fieldwork manual is structured. Therefore, I reviewed two books, *The Essential Guide to Occupational Therapy Fieldwork Education* and *Occupational Therapy Fieldwork Survival Guide: A Student Planner*, that provided further insight into developing the manual properly during this phase. Additionally, the UNLV OTD fieldwork manual was also reviewed. This assisted in identifying the proper format for an educational manual tailored to students. The design of the manual was reviewed by the AFWC, the UNLV visiting assistant professor, and the CCA faculty to ensure ease of use.

Phase III: Develop

The development phase aimed to culminate both proactive and reactive dictations by focusing on preventing unwanted or unprofessional behavior and the consequences of improper conduct. These implied guidelines included attendance, dress code, professional behavior, and patient record-keeping. Establishing clear and concise guidelines will help save time in the future and mitigate any problems if they arise. Since fieldwork allows students to demonstrate their skills as healthcare professionals, professional conduct was emphasized and expected to demonstrate full competency.

An overview of the policies and guidelines within UNLV's OTD program aided in developing the fieldwork manual. The information gathered elicited the professional behavior required of students while on fieldwork. To further uphold professional ethics, the scope of practice was discussed with the principal to determine the appropriate procedures OT students can perform when working with clients. The ACOTE standards were also reviewed, which ensured that the fieldwork manual was aligned with UNLV's fieldwork standards and learning objectives.

Phase IV: Write

During the writing phase, the manual was drafted using the information gathered. The rough drafts were shared with select members from the UNLV OTD department to ensure completeness and inclusion of necessary material. Throughout the capstone experience, suggestions to enhance the fieldwork manual were occasionally provided. Most of the revisions were based on the student's perspective, reassuring the manual was designed to help those during fieldwork rather than serve as a lengthy read. Overall, the objective of the capstone project was to affirm that the fieldwork manual is being constructed to meet the academic goals of fieldwork students.

Along with the commencement of the initial drafts, additional assessments were developed to strengthen the reliability of the manual's content. First, a cumulative 10-item quiz was created to ensure that students had read the manual in its entirety. The questions were designed to challenge the students' knowledge and increase their overall understanding of the manual (see Appendix E). The AFWC decided that a seven or higher passing score would demonstrate competency in the fieldwork manual. Future fieldwork students would be instructed to participate in the quiz, and the results would be submitted to and reviewed by the site mentor. Next, a 7-item semi-structured questionnaire was also created and implemented to garner participant feedback (see Appendix F). The questionnaire contained subjects that required students to rate their opinions on subjects on a five-point Likert scale, and it also included a text entry box to allow students to voice their honest opinions for improving the fieldwork manual. Lastly, a 5-item semi-structured exit survey was developed to seek the views of CCA's faculty on occupational therapy services during the tenure of the capstone experience (see Appendix G). Similarly, a five-point Likert scale was utilized to better understand the teachers' perspectives.

Phase V: Evaluate

Finally, the evaluation phase allowed the opportunity to distribute the fieldwork manual, competency quiz, and questionnaire to the participating OT students. All the documents were provided by sharing an online link for students to access electronically. The selected CCA faculty members were provided a QR code that led to the exit survey, which retrieved their opinions about OT services during the capstone experience. The evaluation phase also consisted of interpreting the collected data. Once data was collected, the results generated either complimentary themes or highlighted an improvement area. Both categories were assessed to determine how the manual can be refined to maximize the overall fieldwork experience.

Following data analysis, the evaluation phase continued with multiple review sessions where the fieldwork manual was analyzed thoroughly for optimal use. All stakeholders, including Cornerstone personnel, OT fieldwork students, and UNLV OTD faculty, were active contributors in the evaluation process as each group provided feedback and suggestions for quality improvement. After the OT students completed the quiz and questionnaire, a revised manual with the suggested edits was provided electronically on March 15, 2024, to determine if additional edits were required. Next, an edited version was sent electronically to the CCA staff on April 1, 2024, after receiving their survey results and feedback. Lastly, the UNLV OTD faculty reviewed the fieldwork manual for further suggestions on April 5, 2024. Prior to the latest model of the manual being published, a final review was conducted with the principal at Cornerstone Christian Academy and the site mentor to ensure the manual was grounded with the proper resources to maximize the experiential learning of fieldwork students. Upon completion, the final updated manual was printed and sent electronically to CCA and the UNLV OTD for future OT fieldwork students to use.

Ethical and Legal Considerations

UNLV OTD students are required to complete preliminary documentation before fieldwork, including the submission of background checks, drug screenings, immunizations, and more, to ensure alignment with the requirements of the facilities where the fieldwork educators are located. Additionally, CCA requires every patron to scan their driver's license upon entry for their systematic background check, and all incoming guests must print personalized badges for identification throughout the school grounds. However, the intended audience for this fieldwork manual fieldwork students from UNLV. The required documents the participants completed did not collect any identifiable data. Therefore, approval from the institutional review board (IRB) did not need to be obtained.

Outcomes from the quiz and questionnaire remained enclosed, and all participants were anonymous. The CCA faculty's results of the exit survey will also remain confidential. All participants were required to provide verbal consent or consent via email documentation. All CCA students who wish to participate in OT services must complete the school's consent form with a parent's or guardian's signature (see Appendix H). Any occupational therapy treatment of CCA students will remain confidential and protected under the Family Educational Rights and Privacy Act (FEPR) and the Health Insurance Portability and Accountability Act (HIPAA).

Results

This capstone project generated positive outcomes. First, all participating OT students scored eight or higher on the quiz, demonstrating a passing grade for competency in reading the fieldwork manual (see Table 2). As one of the objectives of this capstone project was to identify the opportunities for improving the quality of the fieldwork manual, the quiz questions were also sorted into four themes to determine the areas of the manual that may require further revisions. Most themes consisted of questions that yielded an average score of 85% or higher, but an average score of 76% was produced from the questions categorized under the professional expectations theme. After revising the professional expectations content of the fieldwork manual based on the average scores, the AFWC provided further feedback to increase the clarity of information in the selected sections.

The questionnaire also garnered positive feedback from the participants. Students posted scores of “agree” and “strongly agree” in all questions except question 3 (the fieldwork manual sets clear expectations and guidelines for Level I and Level II fieldwork students at CCA), emphasizing the need to further describe Level I fieldwork tasks. Common themes from the OT fieldwork students included the material having clear, understandable information, students experiencing increased levels of self-efficacy, and students expressing their desire to have the manual when they conducted their fieldwork placements in the past at CCA (see Table 3).

Feedback from the CCA staff members from the exit survey was also positive, notably how all staff members scored 4-agree or 5- strongly agree on all questions. Common themes included an increased value of the role of OTs after reading the fieldwork manual. They also appreciated the accurate description of the school-wide culture and its routines. A few of the CCA staff requested to add the “Love and Logic” approach within the social-emotional learning

section, as it is practiced regularly in the school alongside the Zones of Regulation and the Friendly Curriculum. Feedback from the UNLV OTD program faculty included suggestions for editing required OT documents and the overall design to appeal to all users. Revisions were made based on the feedback provided and presented to all participants to demonstrate the recommended changes.

Table 2

Participant Quiz Scores

Categorized Themes	Mean	SD
Overall Scores	9	0.66
Notable Staff Members	8.5	0.61
SEL Curriculum	9	0.69
Professional Expectations	7.7	1.31
Fieldwork	10	0

Note. The results of the 10-item competency quiz for the OT student participants ($n = 10$) are shown above. Each question was categorized into one of four themes to determine which areas of the fieldwork manual required further revisions.

Table 3*Questionnaire Summarized Themes*

Participants	Themes
OT Fieldwork Students	<ul style="list-style-type: none">❖ The content was easy to navigate❖ The design was appealing to the eyes❖ The language was easy to digest❖ Having the fieldwork manual would have helped heavily during the preparation❖ The material was well-written in a professional, student-related manner❖ More expectations can be set for Level I fieldwork students❖ An early abstract of the material can be inserted to provide initial details
Cornerstone Christian Academy Staff Members	<ul style="list-style-type: none">❖ Most staff members stated they learned how important OTs are in the school setting❖ The manual provides an accurate description of the school and its practices❖ “Love and Logic” can be mentioned as a school-wide implemented SEL program❖ It provides step-by-step information for handling students’ safety when the time occurs
UNLV OTD Program Faculty Members	<ul style="list-style-type: none">❖ Grammatical errors❖ Overall design and font color❖ Revisions to required documents for OT

Note: Themes from the CCA staff members were produced from the 5-item exit survey. The themes from the UNLV OTD Program faculty were produced through verbal communication. The OT fieldwork student themes were generated through an open-ended questionnaire question.

Discussion

The goal of this capstone project was to develop a fieldwork manual for Cornerstone Christian Academy that would better prepare and guide occupational therapy fieldwork students at this site. Results indicated the competency quiz and questionnaire reflected the effectiveness of the fieldwork manual. During the capstone experience, relationships were forged through community collaboration, service delivery, and advocacy for the OT profession. Consistent communication with CCA's administration team provided the opportunity to constantly exchange ideas for adding to the fieldwork manual. While half of the capstone experience was committed to providing therapeutic services to attending CCA students, it simultaneously guided the pertinent information that would later be required in the manual. By integrating OT into this community-based, role-emerging area, the overall process promoted the one of the prominent research priorities from AOTF, "novel practice areas" (AOTF, n.d).

Promoting OT in the private school setting further advances the profession by advocating for the uninformed. These stakeholders were shown the benefits of engaging in the OT process through different forms. Students who struggled at CCA were treated with meaningful interventions to help overcome academic barriers. The referring teachers were also included in the strategic planning for student academic achievement. Parents were recommended activities to perform at home to carry over the therapeutic process so the student could continue to enhance the targeted skills. The parents were provided additional support that reassured them OT services were not only to aid students but also to alleviate the parents' stress of trying to find ways to help their children succeed. Effectively supporting these caregivers is salient to promoting the participation of the people they support, as mentioned in the AOTF research priority of "family and caregiver supports, resiliency, and well-being" (n.d.).

Further research on client-centered interventions for the students led to the addition of addressing another AOTF research priority of “mental health and well-being” (n.d.). With many of the referred students experiencing deficits in social-emotional skills and self-regulation, discoveries in the literature review emphasized the importance of mental health and social skills affecting academic performance (Chan et al., 2017; Watt et al., 2023). As interventions were tailored to address aspects such as cognitive-behavioral techniques, mindset shifting, and intrinsic motivation, the fieldwork manual was developed to include these principles and to guide OT students to practice CCA’s current social-emotional curriculums, which can lead to increased student mental health and positive social interactions.

During the overall experience, varying schedules posed frequent barriers to establishing meetings and performing service delivery. The staff would also ask for spontaneous favors to address the students, such as conducting presentations at school assemblies or de-escalating a situation involving students with poor self-regulation. Frequent changes to the school schedule were also incorporated, sometimes without notice. As a result, many OT sessions or meetings with the administrative team were rescheduled due to scheduling conflicts. In the future, fieldwork students should be prepared to become adaptable when conducting fieldwork experiences at CCA.

Limitations

One of the possible limitations is the S.E.L.F. approach, as it is limited to addressing the specific needs of the audience and the partnering institution for fieldwork. Other OT programs, not including UNLV, may involve different educational priorities, and the availability of fieldwork placements may also limit opportunities for OT students. In addition, the topics of the fieldwork manual were tailored to benefit occupational therapy students on level I and level II fieldwork. However, if additional OT or OTA programs were allowed to conduct fieldwork at this site, it may pose limitations as the fieldwork manual will be aligned with UNLV's curriculum. Since there may be different levels of didactic coursework between OT and OTA students, the fieldwork manual may also limit the number of its users due to its feasibility toward only OT students of UNLV.

Another limitation is the relationships between some participants and the researcher. This may have deterred some OT students from eliciting honest feedback due to their biases. Likewise, CCA faculty members may have fallen prey to their biases when completing the exit survey. As a result, the answers may have suffered from a type of acquiescence or demand bias. To combat this in the future, the feedback questionnaires for the OT students and CCA faculty may consist of different questions or may be administered by another individual.

The gap in the current literature on students' fieldwork experiences, specifically within the private school-based setting, posed a significant limitation. The lack of current evidence describing fieldwork experiences in private schools creates a barrier to future researchers and the underserved students within those schools. Limited research can prevent OT students from conducting fieldwork placements within role-emerging practice areas such as private educational institutions, creating an underserved population of students requiring OT services. Future studies

should examine the perspectives of all private school stakeholders involved with occupational therapy services. Such studies can further develop fieldwork manuals that can assist in future research and maximize the overall fieldwork student experience.

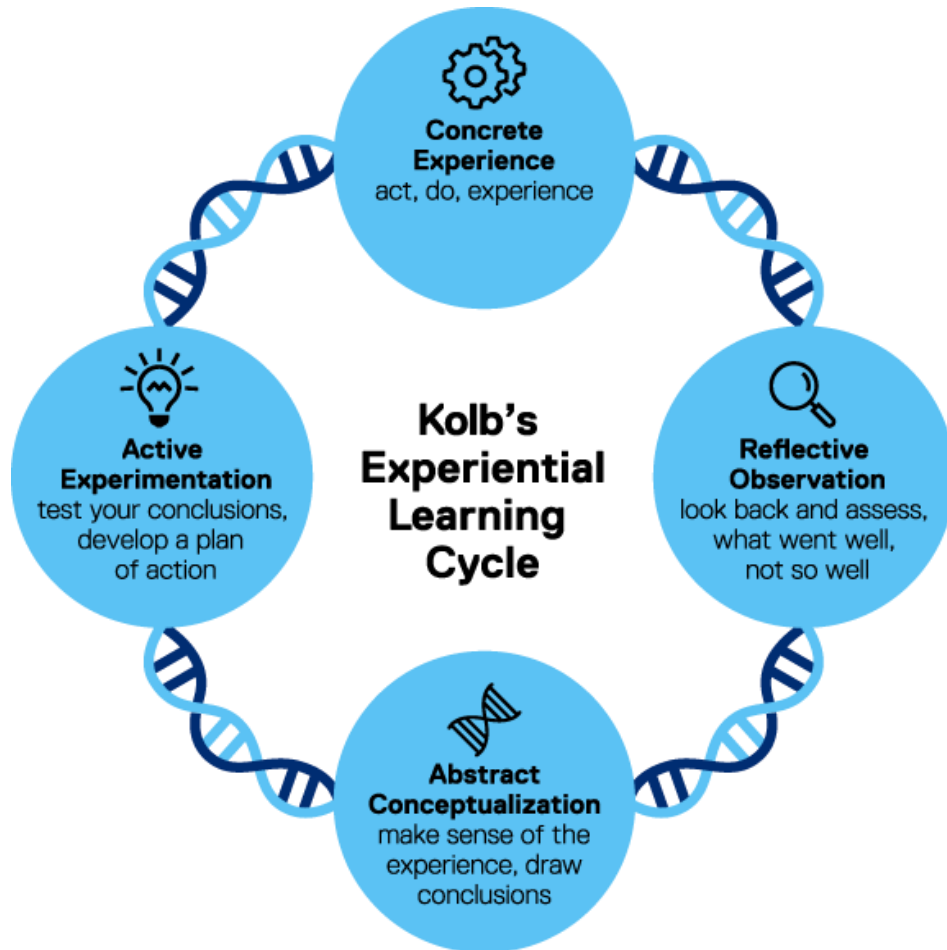
Conclusion

Overall, the fieldwork manual proved to be highly advantageous for all stakeholders involved. Furthermore, the capstone project demonstrated how fieldwork placements in role-merging areas can be significantly beneficial (Matilla & Dolhi, 2016; Mohler & Brown, 2020). Fieldwork opportunities in role-merging or nontraditional areas can equip OT fieldwork students with the skills and knowledge to become effective healthcare practitioners (Clarke et al., 2014; Lau & Ravenek, 2019). The accessibility of a fieldwork manual during the experiences enhances the overall learning experience and increases one's self-efficacy as a future OT practitioner (Greiner, 2015; Meyer & Hunley, 2022). As Nevada continues to reform the amount of educational support, opportunities in private-school-based settings should not be overlooked. They can bridge the gap to serving students needing OT services and may eliminate the barrier for OT students to perform experiential learning opportunities in such areas.

Cornerstone Christian Academy allows future occupational therapy practitioners to engage in a community that strives for academic excellence. Fieldwork experiences at this site strengthen an individual's clinical skills and are another resource students can use to reach optimal academic performance. Moreover, CCA can serve as a model for other private institutions that may be considering integrating OT services within their schools. This can be an opportunity to serve as change agents in local private schools to continue enhancing students' academic performance and to further advocate for OT in underserved areas.

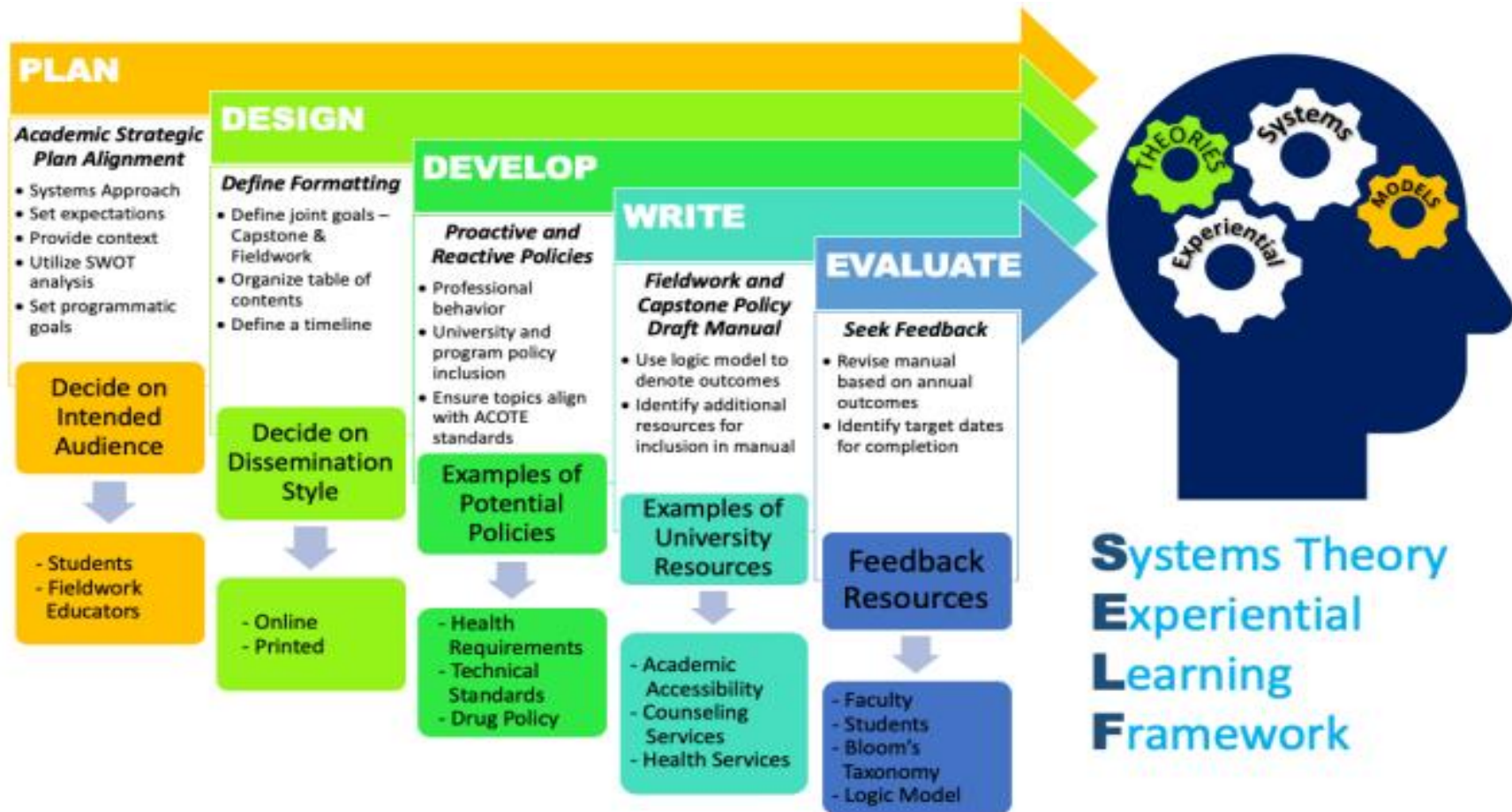
Appendix A

Kolb's Experiential Learning Cycle



Appendix B

System Theory Experiential Learning Framework (S.E.L.F. Approach)



Appendix C

Memorandum of Understanding



Occupational Therapy Doctorate Capstone Project and Experience Proposal Individualized MOU

This form is to be completed by the student with assistance from the faculty mentor and site mentor prior to the Capstone Experience.

Student Name: Jerome Amigo
Capstone Experience Dates: 01/16/2024 – 04/17/2024
Capstone Experience Site Mentor: Dr. Christina Bustanoby
Site Mentor's expertise related to Capstone Experience: Experience in Program Development
Site Mentor's Email: christina.bustanoby@unlv.edu
Faculty Advisor for Capstone: Dr. Christina Bustanoby
Faculty Advisor Email: christina.bustanoby@unlv.edu

Description of Capstone Project and Experience – (Written by student)
<p>PICO/PIO</p> <p>For occupational therapy fieldwork students at Cornerstone Christian Academy, would developing an evidence-based fieldwork manual increase the experiential learning process compared to the current fieldwork design?</p>

Needs Assessment: How will your capstone project and experience contribute to knowledge in the profession and what gap are you hoping to fill? A brief 2-3 paragraph essay with references
<p>School-based occupational therapy services have been beneficial to students in achieving academic success (Ball, 2018). Since the rapid transition of OT services from medical settings into schools with the Education for all Handicapped Children (EHC) in 1975, occupational therapists have been backed by legislative mandates to regularly integrate services into schools and become part of the school's personnel to help with any educational needs of the students</p>

(Ball, 2018; Bonnard & Anaby, 2016; Lappalainen & Ruotsalainen, 2023). Although much support has been given to educational systems, there is limited research on students receiving occupational therapy services within private schools. According to the Nevada Board of Occupational Therapy (2020), there are approximately 130 private schools in Nevada but less than 10% of those schools offer educational support services, which include occupational therapy. Public schools receive federal, state, and local funding; however, private schools do not receive these types of funds, as they are limited to only receiving monetary payments through tuition payments, grants, and donations (U.S. Bureau of Labor Statistics, 2022). As a result, private schools may only allocate their funds towards different priorities, leaving occupational therapy services out of the picture. With limited services being offered in these settings, this also limits fieldwork opportunities for OT students to work with in an underserved community.

The University of Nevada – Las Vegas has recently partnered with Cornerstone Christian Academy to allow OT students to conduct their fieldwork experiences at the school and work with attending students. However, as the role of OT is still in the process of being established, Cornerstone is now considered a role-emerging practice area, where the managing OT may not be physically accessible at all times in comparison to traditional practice settings (Lau & Ravenek, 2019). If students are assigned to this location for fieldwork, students may feel unprepared or unguided while trying to meet curricular demands. The proposed solution is to develop a fieldwork manual that will better guide OT students through their experiential learning process. The fieldwork manual will include objectives and expectations that students will review in order to perform efficiently during fieldwork. In addition, the manual will also include guidelines that will focus on the prevention of unwanted or unprofessional behavior. Lastly, the fieldwork manual will also include pragmatic solutions if problems were to arise during the fieldwork experience. With the development of this fieldwork manual, it can serve as a bridge for didactic coursework to clinical application, and the mutually beneficial relationship between Cornerstone and UNLV can demonstrate and advocate for the dire need of OT services in private schools.

References

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Nevada Board of Occupational Therapy. (2020, January 2). *Occupational therapy practice survey data*. Nevada Board of Occupational Therapy.
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<https://www.bls.gov/oes/current/oes291122.htm>

Write three measurable objectives (goals) for your learning experience during your Capstone Experience and potential activities to meet those objectives. The student, faculty mentor, and site mentor should discuss and agree.

1. Capstone student will demonstrate competency in school-based OT services by the end of the academic term.
 - a. Potential Activities
 - i. Treating clients (20% of caseload)
 - ii. Observation of classes, students, and faculty
 - iii. Continue fieldwork manual development, capstone manuscript editing
2. Capstone student will identify the appropriate guidelines that are required in a fieldwork manual by Week #5.
 - a. Potential Activities
 - i. Review and record all related ACOTE standards into the initial components of the fieldwork manual.
 - ii. Meet with OT faculty department to ensure congruence with curricular outcomes.
3. Capstone student will apply different methods of self-administered tests to gather feedback from participating fieldwork students by the end of the academic term.
 - a. Potential activities
 - i. Create a competency test to ensure students have read the fieldwork manual in its entirety.
 - ii. Develop a semi-structured questionnaire to gather feedback on improving the fieldwork manual

Appendix D

Experience Hours and Supervision Log

Appendix D Occupational Therapy Doctorate Capstone Experience Hours and Supervision Log (Through EXXAT)

The Weekly Activities and Related Learning Objectives are to be documented by the student, Faculty Mentor, and Site Mentor prior to the Capstone Experience start date. Each week the Site Mentor will document the hours and student progress towards those activities and objectives, including signature and date completed.

Mentoring Agreement:

Student and Site Mentor will meet 4 times per week for 120 minutes.

Dates	Weekly Activity Description	Related Learning Objective	# Hours	Mentor Signature and Date
Week 1 [01/16-01/19]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Phase #1: Plan Capstone student will begin to identify main objectives and goals of the fieldwork manual.</p> <p>Capstone student will review program structure with principal by the end of the first week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 2 [01/22-01/26]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will complete AOTA E-course to learn more about OT's Role in school-based settings.</p> <p>Capstone student will identify the appropriate guidelines that are required in a fieldwork manual before the end of the week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	

Week 3 [01/29-02/02]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Phase #2: Design</p> <p>Capstone student will decide how the information in the fieldwork manual will be formatted by the end of Week #3.</p> <p>Capstone student will review AOTA E-books to develop skills to efficiently write a fieldwork manual by the end of Week #3.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 4 [02/05-02/09]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will review UNLV Fieldwork Manual to record essential information that should be included in CCA FW manual.</p> <p>Capstone student will identify the appropriate guidelines that are required in a fieldwork manual before the end of the week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 5 [02/12-02/16]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Phase #3: Develop</p> <p>Capstone student will review program guidelines, policies, and procedures with UNLV faculty.</p> <p>Capstone student will identify the appropriate guidelines that are required in a fieldwork manual before the end of the week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	

Week 6 [02/19-02/23]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student determine scope of practice with principal when working with CCA students by the end of the week.</p> <p>Capstone student will identify all related ACOTE standards that are to be included in fieldwork manual by Week #6.</p> <p>Capstone student will identify the appropriate guidelines that are required in a fieldwork manual before the end of the week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 7 [02/26-03/01]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Phase #4: Write</p> <p>Capstone student will begin writing initial draft of fieldwork manual by the end of the week.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 8 [03/04-03/08]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Develop competency test</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will develop competency test to ensure FW students have read the FW manual.</p> <p>Capstone student will apply different methods of self-administered tests to gather feedback from participating fieldwork students by the end of the academic term.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	

Week 9 [03/11-03/15]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Develop feedback questionnaire</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will develop semi-structured questionnaire to gather feedback from FW students.</p> <p>Capstone student will apply different methods of self-administered tests to gather feedback from participating fieldwork students by the end of the academic term.</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 10 [03/18-03/22]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will review version #1 of FW manual with CCA personnel; make revisions as needed</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 11 [03/25-03/29]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers, students, FW students)</p> <p>Continue working on capstone manuscript</p>	<p>Capstone student will review version #2 of FW manual with current and former FW students; make revisions as needed</p> <p>Capstone student will demonstrate competency in school-based OT services by the end of the academic term.</p>	32	
Week 12 [04/01-04/05]	<p>Treating (school-based; 20% of caseload)</p> <p>Observations of classes (teachers,</p>	<p>Capstone student will review version #3 of FW manual with UNLV OT Faculty; make revisions as needed</p> <p>Capstone student will demonstrate competency in school-based OT</p>	32	

	students, FW students) Continue working on capstone <u>manuscript</u>	services by the end of the academic term.		
Week 13 [04/08-04/12]	Treating (school-based; 20% of caseload) Observations of classes (teachers, students, FW students) Continue working on capstone <u>manuscript</u>	Capstone student will review version #4 of FW manual with CCA principal and UNLV OT Faculty; make revisions as <u>needed</u> Capstone student will demonstrate competency in school-based OT services by the end of the academic term.	32	
Week 14 [04/12-04/16]	Treating (school-based; 20% of caseload) Observations of classes (teachers, students, FW students) Finish working on capstone <u>manuscript</u>	Capstone student will finalize revisions and finish publishing FW manual. Capstone student will demonstrate competency in school-based OT services by the end of the academic term.	32	

I agree with the above stated objectives and activities to be completed within a 14-week timeframe. The site mentor and/or student can add additional objectives as any time as the experience dictates with approval of the faculty mentor. Any removal of objectives will need to be approved by the faculty mentor and Capstone Coordinator.

X Jerome Amigo

11/23/2023

Student Signature

Date

x Christina Bustanoby, OTD/ OTR/L, CSRS

11/28/23

Faculty Mentor Signature

Date

x Christina Bustanoby, OTD, OTR/L, CSRS

11/28/23

Site Mentor Signature

Date

Appendix E

Fieldwork Manual Competency Quiz



Who is the principal of Cornerstone Christian Academy?

Cindy Capaci

Joey Massanari

Debbie Kaye

Kathy Yohner

If a student does not meet the minimum standard of competence for their assigned fieldwork placement, what will be the next course of action?

The Academic Fieldwork Coordinator will develop a recommended action plan

A repeat experience will be arranged

The student will be separated from the program

An additional course assignment will serve as an alternative option to fulfill credit hours

Who must you seek approval from before scheduling any middle school students?

Joey Massanari

Greg Massanari

Cindy Capaci

Kathy Yohner

When should an OT student wear an identification badge?

When working a CCA student in the mOTivation room

When walking in the hallways

During recess and lunch so all students and faculty can identify you

At all times when on the school premises

When referring to the Zones of Regulation, the Red Zone is considered the "bad zone".

True

False

Which component is not part of the 5 Core Competencies of the Friendly Curriculum?

Relationship Skills

Social Awareness

Building Empathy

Self-Management

If you are working with a student and a Hard Lockdown occurs, you should call the main office immediately.

True

False

Which of these is not considered appropriate dress code at Cornerstone Christian Academy?

Solid-colored polo shirts

Closed toed shoes

Excessive jewelry

Identification badge

During Level II Fieldwork, which two documents should be completed prior to the first OT session with a CCA student?

Parent Consent Form & Sensory Profile

Sensory Profile & Teacher Input Form

Parent Consent Form & Teacher Input Form

When should the OT student be expected to work independently during Level II Fieldwork?

Week 1

Week 3

Week 5

Week 6

Appendix F

Fieldwork Manual Feedback Questionnaire



The fieldwork manual is thorough and provides substantial information to assist OT students at CCA.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

After reading the fieldwork manual, I feel prepared to follow an emergency protocol when required.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

The fieldwork manual sets clear expectations and guidelines for both Level I and Level II fieldwork students at CCA.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

The fieldwork manual provides an adequate amount of information about Cornerstone Christian Academy for the OT student to become acquainted and prepared for the first day of fieldwork.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

The fieldwork manual provides enough information on the Zones of Regulation and the Friendly Curriculum for the OT student to continually practice its components.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

The fieldwork manual accurately describes the documents that must be completed prior to and following an OT session with a CCA student.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

The fieldwork manual increases my confidence to work independently when the OT supervisor is not on site.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
---	-----------------------------------	----------------------------------	--------------------------------	--

Please provide any additional information that would improve the quality of this fieldwork manual. (Optional)

Appendix G

Cornerstone Christian Academy Faculty Exit Survey for OT Services



I understand the role and value of occupational therapy within the school-based setting.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
--	-----------------------------------	----------------------------------	--------------------------------	---

I feel that occupational therapy services have positively impacted student success.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
--	-----------------------------------	----------------------------------	--------------------------------	---

The OT Team members were easy to collaborate with.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
--	-----------------------------------	----------------------------------	--------------------------------	---

I wish to have occupational therapy services remain at Cornerstone Christian Academy.

Strongly Disagree <input type="radio"/>	Disagree <input type="radio"/>	Neutral <input type="radio"/>	Agree <input type="radio"/>	Strongly Agree <input type="radio"/>
--	-----------------------------------	----------------------------------	--------------------------------	---

Please provide any additional comments about having occupational therapy services (optional)

--

Appendix H

Cornerstone Christian Academy Consent Form for Occupational Therapy Services



Cornerstone Christian Academy
5825 Eldora Ave • Las Vegas, NV 89146 • Suite B
Phone: (702) 939-5050 Fax: (702) 507-0699

PARENT CONSENT FORM – Occupational Therapy

Name of child: _____

Cornerstone Christian Academy is excited about a partnership opportunity with the UNLV Occupational Therapy Program. Our goal in collaborating with the OT program will allow the child to strengthen skills in areas that may interfere with their academics. The school team feels your child would benefit from adaptive and specialized strategies to help them meet their learning potential.

We are requesting your permission to complete a consultation with a licensed occupational therapist. In addition, the students enrolled in the UNLV Occupational therapy program will work alongside the licensed occupational therapist. With all specialized interventions, we require your consent to continue this process to enhance your child's educational needs.

The occupational therapist will collaborate with the school team and you, the parent, to determine appropriate accommodations for your child's learning environment and tasks in order to develop an educational program that aligns with your child's needs. As part of this collaborative team process, you may be invited to discuss ideas and provide input.

The occupational therapist may model or coach school staff as to how to best work with your child's particular abilities to create successful, safe, and inclusive learning experiences. The occupational therapist may continue to consult for as long as requested by the school team, but your consent for this process will be required on an annual basis.

I, _____, the parent or guardian of _____,

- ☐ Give consent for targeted consultations with an occupational therapist by my child's school-based team for educational purposes.
- ☐ Refuse to consent for targeted consultations with an occupational therapist by my child's school-based team.

Signature: _____ Date: _____

Parental consent is valid for one year from the date of signature and can be withdrawn at any time with a written request.

Appendix

Occupational Therapy – Service Summary *Skills for the job of living*

Occupational therapists work closely with the teachers and support staff to implement educational plans that align with students' needs.

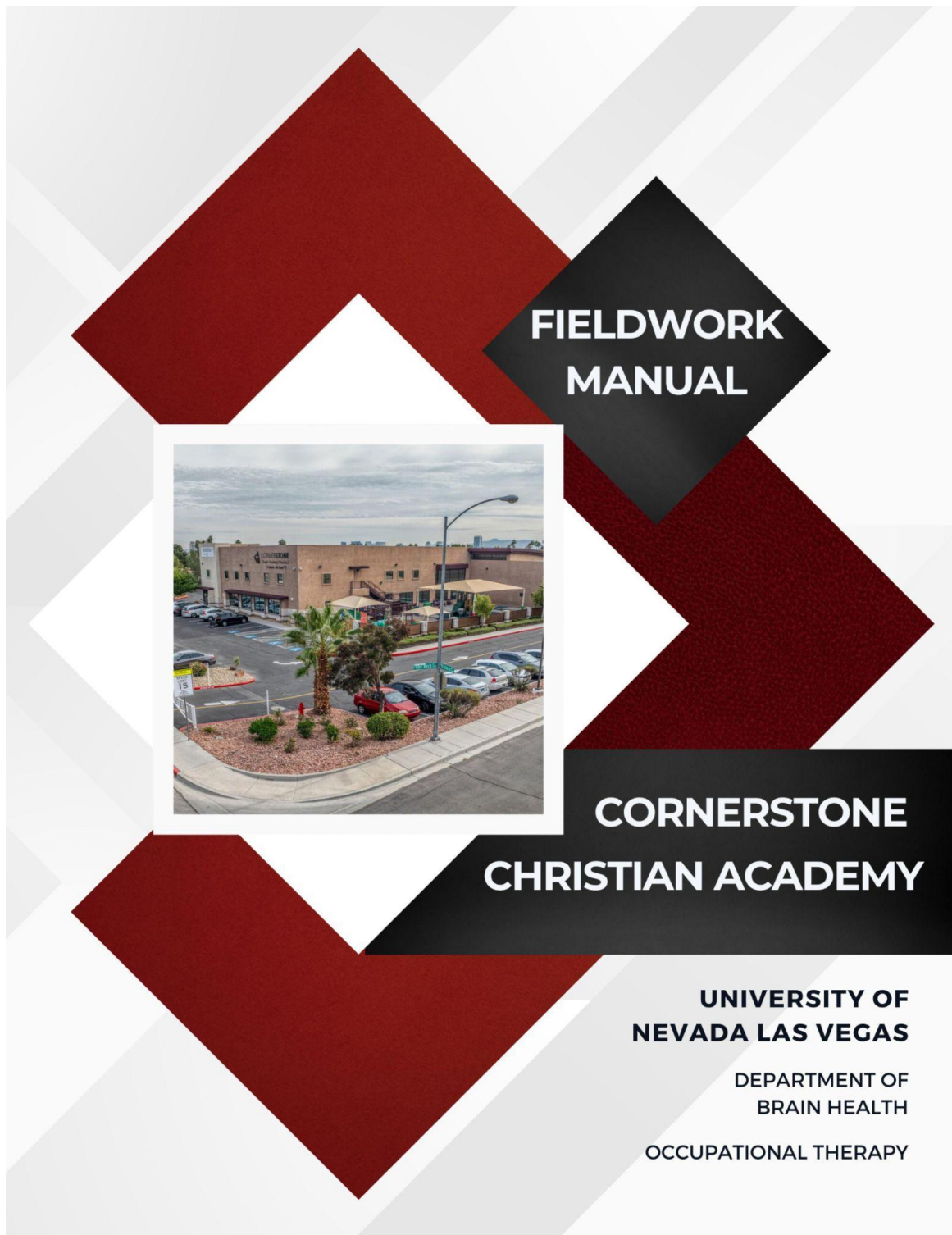
Occupational therapists work with any difficulty with “occupation” or “skills for the job of living.” For children, some skills for the job of school include:

- **Self-regulation** - learning emotional self-control, figuring out how to use strategies to deal with stress, starting to be organized, learning in a group
- **Self-care** that is part of the school day - dressing, eating, going to the bathroom – again, safely and with as much independence as possible
- **Focused attention, play, and engagement in learning** while slowly shifting to the teacher’s agenda
- **Social referencing** – building on self-regulation skills to learn how to understand expectations, how to ask for help, follow the teacher’s lead, understand nonverbal signals from other students and staff, and empathize, using high-quality interactions and multisensory learning opportunities to practice this skill.
- **Functional mobility** - moving around the school building and in and out of positions for learning safely and with as much independence as possible

The occupational therapist's role is to help the school team safely and sustainably make necessary adaptations to optimize each student's learning potential. We will build on your child's current capabilities and strengths to do so. Your child's safety in school is our priority, and this may mean that specialists, such as occupational therapists. With the practice of inclusion, our core belief is to ensure that your child has every opportunity to demonstrate their skills in a safe school environment like other children their age to strive towards academic success.

Appendix I

Cornerstone Christian Academy Fieldwork Manual





Occupational Therapy Fieldwork Manual
for **Cornerstone Christian Academy, Las Vegas, Nevada**

Debbie Kaye
Head of School (Principal)

Cindy Capaci
Assistant Principal

Kathy Yohner
Middle School Dean

Joey Massanari
Lead Pastor

Email: frontdesk@ccanv.com

Office: (702) 939-5050

Fax: (702) 507-0699

5825 W. Eldora Avenue ♦ Las Vegas , Nevada 89146 ♦ 702.939.5050 ♦ ccanv.com

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Mission

"CCA is committed to building strong families for Christ through academic excellence in a Christian environment from generation to generation."

Vision

"It is the vision of Cornerstone Christian Academy and Tykes Preschool to encourage the development of the whole child by engaging the student's spiritual, academic, and physical growth. It is our desire as followers of Christ to pursue excellence in all that we do. We recognize that excellence is first an attitude of the heart toward loving God, showing love to others, and putting forth quality effort. With a school-wide theme of "Excellence in Everything", our students excel in academics, athletics, arts, and attitude. Our goal is to prepare each student to become confident and productive world citizens who are ready to be used by God for every good work."

History

Cornerstone Christian Academy (CCA) was founded in 2001 with the Tykes Preschool later founded in 2003. Their accreditation from the Association of Christian Schools International (ASCI) was awarded through their accountability for maintaining high standards and god-driven principles (CCA, n.d.). The preschool has been consistently ranked amongst the top 1% of preschools within the state of Nevada, earning a five-star rating through the Nevada Silver State Quality Rating and Improvement System (QRIS) three years in a row, being the only preschool to do so. The institution earned the *Best of Las Vegas* award in 2020, solidifying its continued commitment through strong academics within a community cultivated with Christ. For more information about Cornerstone Christian Academy or Cornerstone Church, please visit <https://www.ccanv.com/>



Debbie Kaye, Principal



Greg Massanari, Founding Pastor

Population

With an initial population of 200 students in 2001, their student body has nearly tripled since opening its doors. The Tykes Preschool offers care for children from 18 months to five years old. There are 10 different classrooms to accommodate four different age groups. They prepare each child academically, socially, emotionally, and spiritually through hands-on and interactive learning environments. The emerging curriculum is designed to create a love for learning while preparing students to graduate into CCA's kindergarten.

The academy aspect of Cornerstone serves children from kindergarten to eighth grade. They are taught through core values that integrate the principle of god's word throughout the entire program as a way to develop interpersonal responsibilities and academic preparedness. When students are prepared and equipped with the tools from Cornerstone, they will embrace the life skills needed to impact the world around them.

Barriers

Overall, private schools face numerous obstacles when it comes to providing occupational therapy (OT) services (Nevada Board of Occupational Therapy [NBOT], 2020). These challenges can include financial constraints, limited resources, and a lack of awareness about the benefits of OT. Private schools often have limited budgets, which can make it difficult to allocate funds for hiring qualified occupational therapists or purchasing necessary equipment. Additionally, these schools may not have the same level of access to community resources and support networks as public schools, further limiting their ability to provide comprehensive OT services. Finally, school administrators and staff may lack understanding about the importance of OT in supporting students' academic and social development, which can hinder the integration of these services into the school curriculum. As CCA has begun to partner with the University of Nevada - Las Vegas (UNLV), the Occupational Therapy Doctoral program has created fieldwork opportunities for its students to interact with CCA's students and faculty while also being able to provide therapeutic services for those who are referred. With the recent partnership, it has paved the way for UNLV's OT students to address the educational barriers at CCA.

Legislation Behind School-Based OT

The OT profession has long been involved with educational systems, providing therapeutic interventions to assist students in reaching their academic goals. Ball (2018) highlighted the emergence of school-based OT dating back to as early as 1975 with the passing of the Education for All Handicapped Children Act (EHC), which is currently reformed into the Individuals with Disabilities Education Act (IDEA). IDEA promotes that all children have the right to an education and access to mandated related services, including OT, which later led to the No Child Left Behind Act (NCLB) that created broader opportunities for OT services to be used by schools to benefit students with and without disabilities. Furthermore, the Every Student Succeeds Act (ESSA) replaced NCLB and mandated that occupational therapists (OTs) are to be included as specialized instructional support personnel (SISP). As OTs take on the current role of SISP in schools, they are involved in the planning and implementation of new programs, school-climate initiatives, and assist with any of the school's educational needs to optimize student learning (Ball, 2018). History has proven that OT services are major contributors to academic success and legislative mandates have backed the profession along the way. More importantly, research has demonstrated that school-based OT can increase academic performance among students who receive services.

The Role of OT in the Education System

Occupational therapy plays a crucial role within educational settings by providing support to students who may have difficulties with daily activities that affect their academic performance. School-based OTs focus on helping students develop the skills they need to be successful in the classroom, such as fine motor skills, handwriting, sensory processing, attention skills, social interaction skills, and much more. They use various techniques and tools to assess and address issues related to daily school-related functions. Occupational therapists work closely with teachers and parents to further educate them on the importance of OT services. Together, they can create individualized plans that address each student's unique needs and goals, ultimately helping them reach their full potential and thrive in a school environment (Watt et al., 2023).

Location

Cornerstone Christian Academy is located at 5825 West Eldora Avenue, Las Vegas, Nevada, 89146. This location is a 2-story brown and white building located off of West Sahara Avenue and South Jones Boulevard (see Image 1). Student parking is located in the northwest corner of the parking lot adjacent to the building.

Image 1

Map of Cornerstone Christian Academy, 5825 W. Eldora Ave., Las Vegas, NV 89146



Note: Image courtesy of Google Maps (February 8, 2024)

Map of the School Grounds

First Floor



Second Floor



Level I Fieldwork

The Accreditation for Occupational Therapy Education (ACOTE) 2018 Standards states, “The goal of Level I fieldwork is to introduce students to fieldwork, apply knowledge to practice, and develop an understanding of the needs of clients. During the level I fieldwork experience, occupational therapy students apply the didactic knowledge they have acquired to practical use. The initial fieldwork experience assists future occupational therapists in developing professional skills required for clinical practice, research, and understanding of human occupation.

Level I fieldwork experiences at CCA consist of developing community collaboration. This will entail observation and participation in various aspects of the occupational therapy process. The amount of observation and participation depends on the fieldwork objectives that may be provided in the course’s syllabus. During Level I fieldwork, occupational therapy students are designated to a specific classroom at CCA and are instructed to observe students in their natural environment. Participation may include interacting with students during their classroom routines and with teachers to help with anything that is requested. Participation may also include the performance of various assessments as part of assigned course requirements. Level I fieldwork experiences at CCA are designed for OT students to increase their ability to analyze educational elements and classroom behavior with a therapeutic lens.

When fieldwork begins, all students must check in upon arrival through the iPad device in the front lobby every morning. A driver’s license is required to print out an identification badge. The badge must be worn at all times when on the school premises. The initial day will include meeting with the classroom teacher(s), classroom aide(s), and the students, and observing the daily routine within the classroom. The following days may consist of ongoing observations, aiding the teachers, or connecting with the students during their preset activities to build rapport. Before performing any assessments with a student, confirm with the teacher(s) that the student’s parents or guardians have consented to participating in occupational therapy services. For the completion of any other interactive assignments from course requirements, it is required to request permission from the classroom(s) teachers beforehand.

Level II Fieldwork

According to the 2018 ACOTE Standards, “the goal of Level II fieldwork is to develop competent, entry-level, generalist occupational therapists” (AOTA, 2018). At this stage, fieldwork students are expected to have an in-depth experience of delivering occupational therapy services. All services will focus on the application of meaningful occupations and evidence-based research. Within CCA, all services and interventions must be tailored toward the academic success of its students.

Identification and Building Access

Upon the start of fieldwork, the OT student will receive an identification badge from the security team that can be worn with a lanyard. The badge will allow the OT student to access certain areas that have a tap-to-enter sensor beside the door such as classrooms and front door entrances of the building. The identification badge must worn at all times when on the school premises. The security team will also provide an emergency call button that will go along with the identification badge. The security team will provide further instructions on how and when to utilize its features. A physical key will also be provided until the mOTivation room is equipped with a tap-to-enter sensor.

Preliminary Paperwork

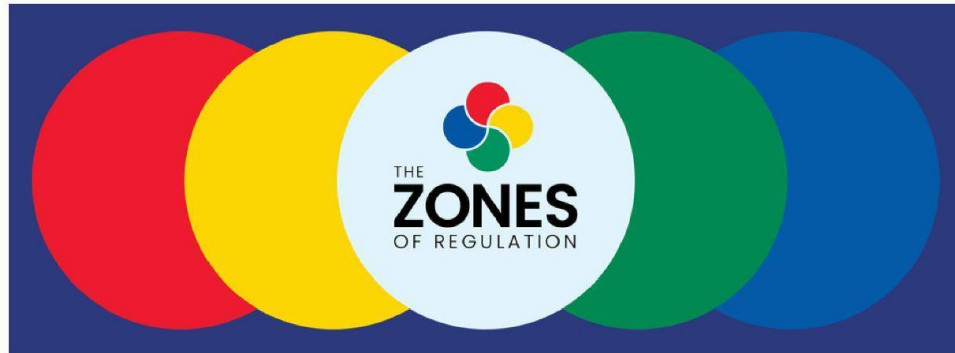
At CCA, the Level II fieldwork experience is designed for the OT student to develop routine initiation, leadership skills, confidence in advocacy, and interprofessional skills. The 12-week fieldwork placement consists of delivering therapeutic services to students who are referred by teachers or their parents and/or caregivers. The **Teacher Input Form** is required for educators to refer their student(s) for OT services and can assist in highlighting the areas that may be impeding academic progress for the student(s) (see Appendix A). The input form addresses all relative skills that students require for academic success. Once completed, further insight into a student’s barriers can assist the OT team in creating potential interventions. The teachers must also retrieve **written consent** from a parent or guardian for the student to receive services (see Appendix B). The consent form will help the parent or guardian understand what the profession of occupational therapy entails and how services can assist their child in the educational setting.

OT Session

When scheduling a session for a CCA student, it is important to abide by the school schedule to avoid disrupting the curriculum or any important events that may be taking place (refer to page 8). It is recommended to determine the most preferable time for a push-in or pull-out OT session by discussing the possible times with the teacher. Talking to the teacher beforehand, such as the day before, can help the OT student and the respective teacher to be prepared. Prior approval is required from the middle school dean, Kathy Yohner, when scheduling a middle school student. For all CCA students, each OT session should be scheduled for 20 minutes. This will include the time to transition from the classroom to the mOTivation room and the transition back. Therefore, the OT student must plan accordingly. Within the allotted timeframe, the OT student can implement client-centered interventions that will target one's academic barriers. When nearing the end of the session, the OT student must complete an **OT Session Review Form** that will provide details on what skills were focused on during the session (see Appendix C). The review form will be given to the teacher, who will then give it to the student's parent or guardian at the end of the day.

Documentation and Additional Preparation

All sessions must be documented and saved electronically within the Google Drive that is provided for the OT student (see Appendix D). The OT student will complete the documentation template as a SOAP note and will establish one long-term goal and two short-term goals. All documentation must be dated with the time, and signed by the OT student. This completes the OT process for an individual session! Moving forward, the OT student should be expected to work independently by the start of the **third week** of the fieldwork experience. Furthermore, the OT student should confer with the fieldwork educator about any questions or concerns. **Additionally, it is recommended that students become familiar with pediatric assessments.** Some of the most commonly used evaluations and assessments at CCA are the *Print Tool Evaluation* for handwriting and the *Sensory Profile* for sensory processing. Lastly, this role-emerging area is not the same as the traditional school-based OT in the Clark County School District. OT students are not required to complete an Individualized Educational Plan (IEP) as part of their services.



Zones of Regulations™

- The Zones of Regulation™ is a framework that promotes the awareness of feelings, energy, and alertness levels while using a variety of tools and strategies for self-regulation, social skills, self-care, and overall well-being.
- This provides a collaborative method for teachers to use with students to think about and discuss how we feel on the inside and sort those feelings into one of the four colored zones, all of which are expected throughout the lifespan.
- Once there is a respectable understanding of our feelings and zones, utilization of the various tools and strategies can help students with zone management in order to reach goals such as completing schoolwork, managing big feelings, social/community interaction, and building relationships.

What are the different types of zones?

<u>BLUE ZONE</u>			<u>GREEN ZONE</u>		
Sad	Tired	Bored	Happy	Content	Calm
Sick	Moving Slowly	Hurt	Collected	Focused	Comfortable
Shy	Exhausted	Depressed	Grateful	Relaxed	Hopeful
<u>YELLOW ZONE</u>			<u>RED ZONE</u>		
Worried	Nervous	Frustrated	Angry	Panic	Devastated
Excited	Silly/Wiggly	Embarrassed	Wild	Elated/Ecstatic	Mad
Scared	Jealous	Confused	Out of Control	Terrified	Hyper
	Upset			Overjoyed	

What are the meanings for each zone?

The Blue Zone

May indicate a **low state of alertness and/or energy**. Students may be demonstrating “down” feelings when they are in this zone. Students may feel sad, sick, tired, bored, or as if they are moving slowly.

The Green Zone

May indicate **more of a calm and organized state of alertness**. Students may present themselves with “neutral” emotions. Some of the feelings associated with this zone are happy, content, focused, and calm.

The Yellow Zone

May indicate a **higher state of alertness and/or energy**, but the individual still has some cognitive control over their emotions. Energy levels and emotions are elevated in this state. Students may feel frustrated, stressed, anxious, excited/silly, wiggly/agitated.

The Red Zone

May indicate a **very heightened state of alertness and/or energy**. Students may be in Fight, Fright, Flight, or Freeze mode when in this zone. The Red Zone contains intense, powerful emotions. Students may feel elated/ecstatic, angry, panic/terror, or devastated.

!! IMPORTANT !!

The zones are based on *feelings* and not *behaviors*. Therefore, all of the zones are ok! This means that the green zone is **not** the goal and the red zone is **not** considered as the “bad” zone. It is natural to experience all four zones. Each student may experience different emotions at different points of time. It is possible to be in more than one zone at a time. Nonetheless, it is imperative for educators to create an environment where they will be able to listen and understand the student’s current feelings to help him/her achieve their goals within the classroom, at home, and in their community.

Zones Friendly Language

It is essential for teachers to demonstrate the use of the Zones language for their students. For instance, a teacher could say, “Today, I feel like I’m in the blue zone. I didn’t get enough sleep last night.”

Instead of...

Try....

You need to calm down	Zones check-in
It's too loud in here	The noise in here is making me feel like I am in the yellow/red zone, and it's hard for me to think. Can you help me take a deep breath to manage my zone?
You need to take a break	It looks like you might be in the _____ zone. Do you need to try a tool?
I can tell you're upset today	Which zone do you think you're in?

Tools and Strategies to help with each zone

<p>When students are in the Red Zone, you can have students try:</p> <ul style="list-style-type: none"> • Taking a break, heavy work, running/walking, deep breaths, listening to music, finding a quiet space, wall push-ups, or time alone • These tools help us our bodies, provide comfort, and regain focus.
<p>When students are in the Yellow Zone, you can have students try:</p> <ul style="list-style-type: none"> • Yoga, counting to 20, squeezing something, nature walks, sensory bins, drinking a glass of water, calm music, or deep breathing • These tools help us regain control and calm ourselves
<p>When students are in the Green Zone, you can have students try:</p> <ul style="list-style-type: none"> • Becoming a helping hand, practicing calming strategies, finding new things to do, peer support, music, water, breaks, healthy food, read • These tools help us maintain a calm, focused, alert state. These are often proactive wellness strategies.
<p>When students are in the Blue Zone, you can have students try:</p> <ul style="list-style-type: none"> • Stretching, bouncing, dancing, thinking happy thoughts, taking a small break/walk, talking to someone, asking for a hug, drinking water, eating food • These tools help us stay safe and begin to feel calmer



The Friendzy Curriculum

The Friendzy curriculum is a social-emotional learning (SEL) program that teaches essential skills such as emotional regulation and empathy. It also emphasizes stress management, improving focus during tasks, and constructive decision-making that can lead to overall academic success for students. The five components of the program are biblical/scripture-based and can further educate students on character development through worship. **OT students are not expected to teach the biblical components of the Friendzy Curriculum; teachers will complete this.** Friendzy is relationally centered which can help influence building positive connections with classmates, family, and school faculty. More information on Friendzy and the biblical references can be found at <https://www.friendzy.co/>



HOW AM I FRIENDZY FEELING?



Friendzy Core Competencies	How It Relates to the Zones of Regulation
Self-Awareness	Students will be able to identify different emotions, the frequency of which they occur, and the overall intensity of the emotions.
Self-Management	Students will learn various tools and strategies to help with the emotional regulation for each zone.
Responsible Decision Making	Students will practice identifying different zones as a class through multiple scenarios (e.g., storytime).
Social Awareness	Students will be able to identify how their emotions can affect their friends and others around them.
Relationship Skills	Students will be able to practice the four previous competencies to strengthen their empathy skills and build relationships as they grow.

!! IMPORTANT !!

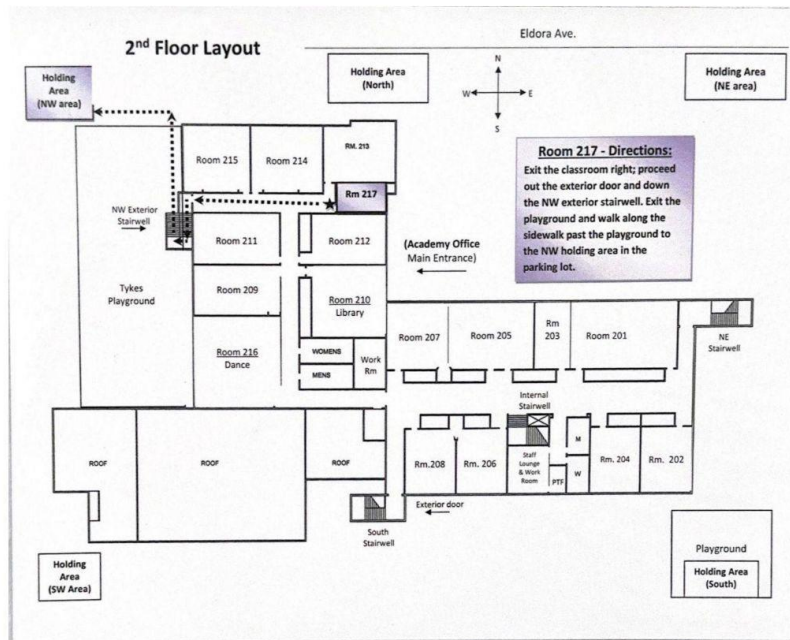
The teachers will implement the Zones of Regulation and Friendzy curriculum at different paces and may be discussed in a variety of forms. It is important to discuss with the teachers where the class is currently with both curriculums in order to convey the appropriate language when working with the students in the mOTivation room.

Emergency Protocols

The OT student is accountable for any CCA student(s) who is pulled from their classroom for OT services until the moment they are returned to class. If an emergency is enacted, it is important to remember that **you** are responsible for the safety of the student that you are currently working with at that moment. Please adhere to the following guidelines during these emergencies:

Fire Drill

During a fire drill, accompany the CCA student(s) you are working with, and walk down the stairs that are located next to Room 215. Proceed to walk past the playground area and meet with the other students and teachers on the northwest side of the parking lot. Locate the nearest faculty member and request to radio the teacher of the CCA student(s) you are currently working with. Notify the teacher of the status of the CCA student(s) and follow the fire drill protocol until it has ended. For further instructions, the Emergency Exit Plan is posted next to the door.



Shelter-In-Place

A shelter-in-place drill is designed to protect classrooms from a biological or chemical attack. During a shelter-in-place drill, it is required to place a piece of thick tape (duct tape, painter's tape, etc.) on the exterior classroom door. In the event of an actual biological or chemical attack, it is required to place tape around the entire interior of the classroom door and cover all of the air vents in the mOTivation room. The tape is located in the grey cabinet. The main office will shut off the ventilation system, and the vents in the classroom must also be closed off with tape. Reassure the well-being of the student(s) you are working with and any other occupants in the room. Once the room is "secured", contact the main office via email at drills@ccanv.com to notify them that you are "ALL SECURED". **DO NOT CALL** the main office during a shelter-in-place drill.

Earthquake Drill

Once you hear the "EARTHQUAKE DRILL" announcement, you will "**DROP, COVER, HOLD ON!**" Do not move until you hear the fire alarm sound. Once the fire alarm is initiated, check the well-being of the student(s) you are working with and walk with students quietly out of the room, shutting the door behind you. Similar to the **Fire Drill** protocol, follow the emergency exit plan to the designated safe area. Once you are outside, locate the nearest member with a radio and communicate with the teachers to relay that the student(s) are accounted for and safe.

If you are on

Playground: Assist the faculty members in moving the students toward the center of the playground area, away from the power lines, trees, signs, and any other hazards as much as possible. Sit on the ground and cover your head.

Hallways: Drop to the floor near a wall and cover your head. Stay away from windows and other hazards. **DO NOT** use the elevators.

Bathrooms: Drop, and cover your head. Stay away from sinks, mirrors, and other hazards as much as possible.

Soft Lockdown

A soft lockdown is an emergency readiness procedure that involves limiting movement within the school environment and restricting external access due to a **possible** threat. The primary goal of a soft lockdown is to prevent potential damage that may be inflicted upon the student body or anyone present within the school premises. During a soft lockdown, everyone may participate in normal activities within the school building. Students and staff are not allowed to be outside of the building until further notice. If you are working with a student in the mOTivation room, you are to continue the OT session with a sense of normalcy while being alert for any potential updates from the security team or the main office via emails or announcements. If you are working with a student on the playground, you must report directly inside the school building and participate in normal activities. The main office will announce when the drill is over and you can continue normal activities.

Hard Lockdown

A hard lockdown entails an actual threat or hazard that has made its way **inside** of the school building or in situations where the school faculty members deem appropriate. Examples of a hard lockdown may include intruders/unauthorized visitors, parental custody disputes, or an individual with a deadly weapon with the intent to harm others such as an active shooter. In the event of a hard lockdown, your safety and the safety of the student(s) you are working with are the **main priorities**. All activities must cease and you are required to take immediate actions to lock and secure the door, gather all personnel into a corner away from the view of the door, limit all movements to a minimum, and remain quiet as possible until further notice. Ensure the well-being of the students and any other personnel in the room. Once everyone is accounted for and the room is “secured”, you will need to **email** the main office drills@ccanv.com that you are “ALL SECURED”. **DO NOT CALL THE MAIN OFFICE**. When the situation is alleviated, the main office will announce when the drill is over and you can resume normal activities. **Note:** If you are on the playground during an OT session, you must report directly to the sanctuary. You will need to assist the faculty with locking the interior doors and ensure the safety of the other students.

Medical Emergencies

Headache: If the student is complaining of a headache, have them drink water. If the headache persists, escort the student to the Nurse's office.

Stomachache/Vomiting: If the student is complaining of a stomachache, have them drink water and rest. Once they have rested for a bit, send the student to the restroom and have them try to have a bowel movement. If the stomachache persists or vomiting occurs, escort the student to the Nurse's office.

Potty Accident: If the student has an extra set of clothes in their backpack, escort the student to the bathroom and have them change. If not, escort them to the Nurse's office.

Temperature: If a student does not feel well, assess the warmth of the student's forehead with the dorsal side of the hand. If an infrared thermometer is located within the room, attempt a reading (any temperature over 100 degrees is considered concerning per the Nurse's office). If the temperature feels abnormally warm or the reading is consistently high, escort the student to the Nurse's office.

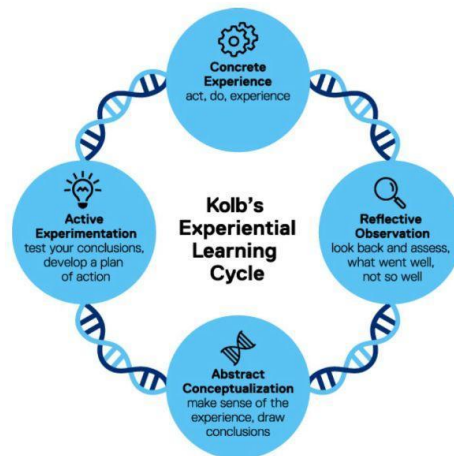
Bloodborne Injury: If a student experiences a cut or scrape and it begins to bleed, apply the injured area with antiseptic spray, located in the first aid kit. Then place a band-aid if needed. If a student experiences a bloody nose, have the student apply tissues and tilt the head back to cease the bleeding. If the bleeding persists, escort the student to the Nurse's office. If a student loses a tooth and blood profuses from the mouth continually, have the student bite down on a cotton roll or tissues and escort them to the Nurse's office.

Anaphylaxis: All teachers who refer their students to OT must indicate if the student has any allergies on the Teacher Input Form. If a student requires to have an emergency medical device at all times, instruct the student to bring it to every session. If a student is experiencing an allergic reaction, have the student utilize the medical device and escort the student to the Nurse's office immediately.

Models of Fieldwork

David Kolb, an American educational psychologist, believed that learning must be grounded in experience (Kolb, 1984). He theorized that learning requires the acquisition of abstract concepts that can then be applied in different situations. In essence, knowledge is developed through the transformation of experience. He created a four-stage, integrated process where each phase is mutually supportive and acts as the foundation for the next step. The four steps include *concrete experience*, *reflective observation*, *abstract conceptualization*, and *active experimentation*. According to Kolb (1984), effective learning only occurs when the learner executes all four stages.

Kolb's Experiential Learning Cycle demonstrates the process that fieldwork students at CCA will encounter when utilizing the fieldwork manual while at the fieldwork site. In addition, students can begin at any phase of the cycle as there is no designated starting point. For example, students can begin with reflective observation on the very first day of fieldwork. Next, they will move on to abstract conceptualization where students can refer back to the fieldwork manual for further guidance with certain elements. Afterward, active experimentation can include students formulating a plan to execute during the next opportunity. Finally, concrete experience can be the phase where students implement their plan through the observations and conceptualizations they have made.



Note: Image courtesy of Toronto Metropolitan University

2018 Accreditation Council for Occupational Therapy Education Standards:

C.1.1: Ensure that the fieldwork program reflects the sequence and scope of content in the curriculum design, in collaboration with faculty, so that fieldwork experiences in traditional, nontraditional, and emerging settings strengthen the ties between didactic and fieldwork education.

C.1.2: Document the criteria and process for selecting fieldwork sites, including maintaining memoranda of understanding, complying with all site requirements, maintaining site objectives and site data, and communicating this information to students prior to the start of the fieldwork experience.

C.1.3: Document that academic and fieldwork educators agree on established fieldwork objectives prior to the start of the fieldwork experience, and communicate with the student and fieldwork educator about progress and performance throughout the fieldwork experience. Ensure that fieldwork objectives for all experiences include a psychosocial objective.

C.1.7: At least one fieldwork experience (either Level I or Level II) must address practice in behavioral health, or psychological and social factors influencing engagement in occupation.

C.1.9: Document that Level I fieldwork is provided to students and is not substituted for any part of the Level II fieldwork. Ensure that Level I fieldwork enriches didactic coursework through directed observation and participation in selected aspects of the occupational therapy process and includes mechanisms for formal evaluation of student performance. The program must have clearly documented student learning objectives expected of the Level I fieldwork.

C.1.10: Require a minimum of 24 weeks' full-time Level II fieldwork. This may be completed on a part-time basis, as defined by the fieldwork placement in accordance with the fieldwork placement's usual and customary personnel policies, as long as it is

at least 50% of an FTE at that site. The student can complete Level II fieldwork in a minimum of one setting if it is reflective of more than one practice area, or in a maximum of four different settings.

C.1.14: Document and verify that supervision provided in a setting where no occupational therapy services exist includes a documented plan for the provision of occupational therapy services and supervision by a currently licensed or otherwise regulated occupational therapist with at least 3 years full-time or its equivalent of professional experience prior to the Level II fieldwork. Supervision must include a minimum of 8 hours of direct supervision each week of the fieldwork experience. An occupational therapy supervisor must be available, via a variety of contact measures, to the student during all working hours. An on-site supervisor designee of another profession must be assigned while the occupational therapy supervisor is off-site.

Professional Expectations and Dress Code

Fieldwork entails a set of professional expectations that are crucial for successful outcomes. These expectations encompass a range of skills and behaviors that future healthcare professionals must exhibit while conducting clinical experiences at CCA. Failure to meet these expectations will first result in a meeting with the Academic Fieldwork Coordinator to develop a recommended action plan. Further consequences may include a repeat of the fieldwork experience or separation from the program. It is essential to approach fieldwork with a high level of professionalism and a commitment to ethical practices while working to meet course requirements.

Fieldwork students must wear the proper attire to exemplify professionalism as future practitioners. Professional attire must consist of solid-colored dress/polo shirts, solid-colored chino pants, closed-toe shoes, and a name tag for identification. If a CCA badge is assigned, it must be worn at all times when on the premises for clear identification. Excessive jewelry must be removed, and tattoos must be covered. In certain situations, students may be asked to dress accordingly for special events that occur at CCA. Otherwise, students should adhere to the required dress code and demonstrate a professional appearance.

Health Insurance Portability and Accountability Act (HIPAA)

Fieldwork students are required to adhere to the HIPAA guidelines that are provided by AOTA (see below). For classroom observations, students must seek approval from the primary teachers to ensure formality. According to the AOTA HIPAA guidelines (n.d.), fieldwork students cannot report the following information in fieldwork assignments such as case studies presentations:

- Name
- Location – including anything smaller than state, such as street addresses
- Telephone numbers/fax numbers
- Electronic email addresses
- Social security numbers
- Medical records from other disciplines
- Biometric identifiers, including finger and voice prints
- Full-face photographic images and any comparable images
- Any other identifying number, characteristic, or code

For written reports, the following information **can** be shared:

- Age
- Race
- Ethnicity

Family Educational Rights and Privacy Act (FERPA)

Under FERPA, schools are required to maintain the confidentiality of student educational records and to implement policies and procedures that ensure that only authorized individuals have access to those records (US Department of Education, 2021). Students and their parents are entitled to the right to inspect and review educational records maintained by the school, the right to request a school to correct records they believe are incorrect, and the right to allow permission before schools disclose any information about the student. In certain cases such as parent separation, both parents can access and review the student's academic records upon request as long as both parents are authorized. CCA is required to obtain written consent from the student or parent before disclosing any personally identifiable data from the student's records. All fieldwork students must adhere to FERPA to help protect the privacy and confidentiality of student education records while still allowing services and administrative functions to occur.

Resources

Websites:

Cornerstone Christian Academy Homepage

<https://www.ccanv.com/>

Private Schools vs Public Schools

https://www.diffen.com/difference/Private_School_vs_Public_School

The Friendly Curriculum

<https://www.friendly.co/>

Zones of Regulation

<https://zonesofregulation.com/>

Articles:

Sensory-Based Interventions in School-Based Occupational Therapy: A Scoping Review

<https://www.tandfonline.com/doi/abs/10.1080/19411243.2023.2275562>

The Student Perspective on Role-Emerging Fieldwork Placements in Occupational Therapy: A Review of the Literature

<https://scholarworks.wmich.edu/ojot/vol7/iss3/10/>

Occupational Therapy Role in School-based Practice: Perspectives from Teachers and OTs

<https://www.tandfonline.com/doi/abs/10.1080/19411243.2019.1636749>

Videos:

What do you do as an occupational therapist in school?

<https://www.youtube.com/watch?v=VJJs7dqe75uM>

Creative Ways to Get Kids to Thrive in School

https://www.ted.com/talks/olympia_della_flora_creative_ways_to_get_kids_to_thrive_in_school

School-Based Occupational Therapy

<https://www.youtube.com/watch?v=j6-mVwkOEW4>

Appendix A: Teacher Input Form

TEACHER INPUT FORM

OT SERVICES

Student _____
Teacher _____
Room # _____

Date _____
Class _____

****Please answer the questions below.**

Handwriting: how are the student's handwriting skills in the classroom as compared to peers?

Student is able to hold a pencil appropriately.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student can write with proper spacing between letters.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to write within the given lines on the paper.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to stabilize paper when writing.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern

Please provide details:

Social-Emotional Awareness: how are the student's social-emotional skills in the classroom as compared to peers?

Student appropriately shares thoughts, feelings, and ideas.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student asks for help when they feel frustrated or stuck.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to follow directions accordingly.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern

Please provide details:

Fine Motor Skills: how are the student's fine motor skills in the classroom as compared to peers?

Student is able to cut with scissors appropriately.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student can perform activities that require both hands	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student can retrieve items with appropriate finger strength.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to hold drawing utensil properly.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern

Other: _____

Visual Motor Integration: how are the student's visual-motor skills as compared to peers?

Student is able to associate pictures with correct words.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to copy an image when drawing	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student can cut or draw an image while staying on the paper.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student completes tasks without squinting.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Other: _____			

Gross Motor Skills: how are the student's gross motor abilities in the classroom as compared to peers?

Student demonstrates proper posture while sitting.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student demonstrates good balance during tasks.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to walk without assistance.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student is able to push/pull with proper force.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student reciprocates arm/leg movement during tasks.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Student does not present with clumsiness.	<input type="checkbox"/> Excels	<input type="checkbox"/> Average	<input type="checkbox"/> Concern
Other: _____			

What are the student's *growing* areas (strengths)?

What are the student's *growing* areas (need for improvement)?

Please list any relevant medical information (Diagnoses, allergies, etc.):

Please list any medications that the student may be taking:

Teacher Signature _____

Appendix B: Parent/Guardian Consent Form



Cornerstone Christian Academy
5825 Eldora Ave • Las Vegas, NV 89146 • Suite B
Phone: (702) 939-5050 Fax: (702) 507-0699

PARENT CONSENT FORM – Occupational Therapy

Name of child: _____

School: _____

The school team feels that your child would benefit from some adaptive and specialized strategies in order to help him/her meet his/her learning potential. Therefore, targeted consultation with an occupational therapist has been requested. As with all specialized interventions, we require your consent in order to continue with this process to further enhance your child's educational program.

The occupational therapist will collaborate with the school team and you, the parent, to determine appropriate accommodations to your child's learning environment and tasks in order to develop an educational program that aligns with your child's needs. As part of this collaborative team process, you may be invited to discuss ideas and provide input.

The occupational therapist may model or coach school staff as to how to best work with your child's particular abilities to create successful, safe and inclusive learning experiences. The occupational therapist may continue to consult for as long as requested by the school team, but your consent for this process will be required on an annual basis.

I, _____ the parent or guardian of _____,

☐ Give consent for targeted consultations with an occupational therapist by my child's school-based team for the educational purposes outlined above.

☐ Refuse to consent for targeted consultations with an occupational therapist by my child's school based team.

Signature: _____ Date: _____

Parental consent is valid for one year from the date of signature and can be withdrawn at any time with a written request.

Appendix

Occupational Therapy – Service Summary *Skills for the job of living*

Occupational therapists work closely with school teams and the Student Support Services team, to craft and implement educational plans that align with students' needs in a safe and inclusive way.

Occupational therapists work with any difficulty with "occupation" or "skills for the job of living." For children, some skills for the job of school include:

- **Functional mobility** - moving around the school building and in and out of positions for learning safely, and with as much independence as possible
- **Self-care** that is part of the school day - dressing, eating, going to the bathroom – again, safely, and with as much independence as possible
- **Self-regulation** - learning emotional self-control, figuring out how to use strategies to deal with stress, starting to be organized, learning in a group
- **Focused attention, play, and engagement in learning**, while slowly shifting to the teacher's agenda
- **Functional communication** – easily accessing communication systems and tools provided by Speech-Language Pathologists as part of the school team, especially where there are also mobility limitations or sensory impairments
- **Social referencing** – building on self-regulation skills to learn how to understand expectations, how to ask for help, how to follow the teacher's lead, how to understand nonverbal signals from other students and staff, and how to empathize, using high quality interactions and multisensory learning opportunities to practice this skill

It is the role of the occupational therapist to help the school team safely and sustainably make necessary adaptations to optimize each student's learning potential. To do so, we will build from your child's current capabilities and strengths. Normal development to your child's potential is the joint goal of occupational therapists and educators. We welcome talking about your child's abilities with you, with your health care providers, and with other agencies that are involved in your child's development. Sharing with other stakeholders will only occur with your consent, and only in order to provide the best possible recommendations to the school team. Most importantly, the safety of your child in school is our first priority, and this may mean that specialists, such as occupational therapists, need to work behind the scenes with many team players to ensure that all aspects of your child's day are thought through and carried out with your child's safety as our top priority. With the practice of inclusion, it is our core belief to ensure that your child has every opportunity to demonstrate their skills in a safe school environment in the manner as other children their age to strive towards academic success.

Appendix C: Occupational Therapy Session Review

Occupational Therapy

Session Review

Child Name: _____ Date: _____

TODAY we worked on ...

<input type="checkbox"/> Feeding skills	<input type="checkbox"/> Social skills
<input type="checkbox"/> Dressing skills	<input type="checkbox"/> Executive functioning
<input type="checkbox"/> Scissor skills	<input type="checkbox"/> Attention / listening
<input type="checkbox"/> Handwriting	<input type="checkbox"/> Following directions
<input type="checkbox"/> Pencil control	<input type="checkbox"/> Multi-step sequencing
<input type="checkbox"/> Drawing shapes	<input type="checkbox"/> Emotional regulation
<input type="checkbox"/> Hand dexterity	<input type="checkbox"/> Sensory strategies
<input type="checkbox"/> Grasp development	<input type="checkbox"/> Body awareness
<input type="checkbox"/> Bilateral coordination	<input type="checkbox"/> Motor planning
<input type="checkbox"/> Visual perception	<input type="checkbox"/> Core strengthening
<input type="checkbox"/> Ocular motor skills	<input type="checkbox"/> Upper body strengthening
<input type="checkbox"/> Hand dominance	<input type="checkbox"/> Gross motor coordination
<input type="checkbox"/> Crossing midline	<input type="checkbox"/> Balance/postural control
<input type="checkbox"/> Tactile sensitivity	<input type="checkbox"/> Other: _____

_____ did a great job with ...

Some activities you could do at home this week are:

Appendix D: Documentation

Student:	Age:	Grade:	Teacher:	Date:	Session Duration:	Time:
					20 minutes	
Session Details:						
Information from Teacher						
Fine Motor Skills: - Handwriting - Manipulation - Tool Use			S: O/A: P:			
Visual Motor/Visual Perceptual						
Bilateral Coordination						
Sensory Processing/Regulation						
Frequency						
LTG						
STG						
STG						
LTG						
STG						
STG						
Therapist:						
Occupational Therapy Student						

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Curriculum Vitae

Jerome Amigo, OTD/S
jeromeamigo@gmail.com

Education

University of Nevada, Las Vegas <i>Occupational Therapy Doctorate</i> Capstone Title: <i>Preparing Occupational Therapy Fieldwork Students in a Role-Emerging Area: Cornerstone Christian Academy</i> Faculty Mentor: Dr. Christina Bustanoby, OTR/L	2024
University of Nevada, Las Vegas <i>Bachelor of Science in Kinesiology</i>	2019

Related Clinical Internship Experience

Cornerstone Christian Academy & Tykes Preschool <i>Capstone Experience & School-Based Service Delivery</i>	2024
Hope for Prisoners <i>Community Re-entry (level I)</i>	2023
NeuroRestorative <i>Outpatient/Inpatient Neuro Rehabilitation (level II)</i>	2023
Cornerstone Christian Academy & Tykes Preschool <i>Community-Based Practice (level II)</i>	2023
Tick Talk Therapy <i>Outpatient Pediatrics (level I)</i>	2023
Yesnick Vision Center <i>Outpatient Specialty – Low Vision (level II)</i>	2022
Henderson Hospital <i>Acute Care (level I)</i>	2022
The Garden Foundation <i>Adult Day Care (level I)</i>	2021

Teaching Experience

Cornerstone Christian Academy & Tykes Preschool	2023-2024
<i>Occupational Therapy Student</i>	

- Educate students and teachers on the social-emotional curriculum
 - Zones of Regulation
 - Friendly Curriculum

Leadership & Service

University of Nevada Las Vegas	2018-Present
<i>Student ambassador and volunteer</i>	

- Engage in volunteer initiatives for future and fellow students and community members

Student Occupational Therapy Association	2022-2023
<i>State Liaison</i>	

- Attend meetings for the Nevada Occupational Therapy Association and relay information to student organizations at UNLV.

Pi Theta Epsilon: Alpha Phi

President

- Communicate with stakeholders and the executive board regarding the advancement of the organization.

Professional Affiliations

Pi Theta Epsilon: Alpha Phi	2023-Present
<i>Member</i>	

American Occupational Therapy Association	2020-Present
<i>Member</i>	

Nevada Occupational Therapy Association	2020-Present
<i>Member</i>	

National Society of Leadership and Success	2018-Present
<i>Member</i>	

Honors and Awards

University of Nevada, Las Vegas General Scholarship	Spring 2024
University of Nevada, Las Vegas General Scholarship	Summer 2023
Dean Honor's Roll	Spring 2019
Dean Honor's Roll	Fall 2018
Dean Honor's Roll	Summer 2018
