

*Atlantic Physical Therapy and Rehab, Inc.*  
*Myrtle Beach, SC*

*Behavioral Objectives – Outpatient Rehabilitation  
Occupational Therapy Student*

**I. FUNDAMENTALS OF PRACTICE:**

- 1. Adheres to Ethics: Adheres consistently to the American Occupational Therapy Association Code of Ethics (4) and site's policies and procedures including when relevant, those related to human subject research.**

Students will:

- a. Demonstrate consistent adherence to professional ethics, codes and adherence to HIPAA regulations for patient confidentiality at all times, including in and out of the outpatient setting.
- b. Maintain all patient related information in compliance with Atlantic Physical Therapy and Rehab. policy on confidentiality.
- c. Respect patients' rights of privacy in all spoken communications.
- d. Consistently demonstrate respect for client confidentiality by protecting written documentation from other people's view and select private spaces to discuss client information with supervisor or other team members.
- e. Consistently demonstrate sensitivity to client's values (culture, religion, social) and ask if there are any issues that may conflict with treatment procedures.
- f. Respect individual goals, wishes, and expectations of patient.
- g. Immediately report any abusive behavior toward a patient to the immediate supervisor and follow reporting procedures.
- h. Be honest in billing for time/interventions.
- i. Create and maintain a safe environment.
- j. Demonstrate awareness of the need for assistance and seek assistance when needed.
- k. Demonstrate professional behavior.
- l. Obtain consent prior to treatment.
- m. Demonstrate proper safety techniques at all times.

- 2. Adheres to safety regulations: Adheres consistently to safety regulations. Anticipates potentially hazardous situations and takes steps to prevent accidents.**

Students will.

- a. Adhere to Universal Precautions guidelines at all times.
- b. Adhere to safety regulation regarding fall prevention, wandering system, infection control, and removing/rearranging dangerous items in clinic.
- c. Follow facility procedures regarding patient, colleague, and building safety.
- d. Follow facility procedures for reporting injuries/incidents.
- e. Report potential safety hazards and unusual occurrences to supervisor.
- f. Assist with the maintenance of equipment in working order.
- g. Contribute to cleanliness of work area and maintain a safe environment.

- h. Complete Atlantic Physical Therapy and Rehab. OT Student Orientation Checklist.
  - i. Follow protocol for disaster/emergency relief/code.
  - j. Demonstrate awareness for the need for assistance and/or seek assistance for supervision.
3. **Uses judgment in safety: Uses sound judgment in regard to safety of self and others during all fieldwork-related activities.**

Students will:

- a. Consistently analyze evaluation/treatment space for potential safety hazards prior to bringing the client into the environment. Ensure that:
  - i. Equipment is set-up beforehand.
  - ii. All nonessential items are put away; environment is clutter-free.
  - iii. Treatment area is scanned for slip and fall prevention.
  - iv. Is aware of potential hazards of equipment being used.
    - 1. Adhere to facility policy regarding use of modalities, use of sharps, and operating equipment in OT clinic.
- b. Throughout treatment/evaluation process identify changes in patient status and environment, which may impact patient safety or staff safety.
- c. Choose activities that are safe, age-appropriate, and appropriate for cognitive/emotional/physical capabilities of patient.
- d. Incorporate fall prevention into all patient treatment plans.
- e. Demonstrate proper body mechanics during therapy; asks for help during unsafe transfers to any functional surface.
- f. Adhere to safety precautions regarding medical equipment.
- g. Continuously monitor patient's response to treatment (i.e. pain).
- h. Monitor patient's vital signs throughout session, noting and adjusting session to changes.
- i. Demonstrate sound safety and judgment with all patient contact (i.e. transfers to secure surfaces, ROM treatment, activities, obstacles in the environment, physical barriers, adherence to MD orders regarding ROM, strengthening, dressing changes, and splints).
- j. Ensure client's safety and comfort at all times especially when specialized equipment is involved (i.e. wheelchairs, computers, walkers).

## **II. BASIC TENETS:**

4. **Clearly and confidently articulates the values and beliefs of the occupational therapy profession to clients, families, significant others, colleagues, service providers, and the public.**

Students will:

- a. Articulate the values and beliefs of the occupational therapy profession, as it relates to rehabilitation, patients, caregivers, etc. when introducing self, through family training, and interactions with members of the multidisciplinary team.
- b. Ensure that all patients/patient's family understand the role of the Occupational Therapist/Occupational Therapy.
- c. Answer any questions that the patient/patient's family may have regarding the values and beliefs of the occupational therapy profession.

- 5. Clearly, confidently, and accurately articulates the value of occupation as a method and desired outcome of occupational therapy to clients, families, significant others, colleagues, service providers, and the public.**

Students will:

- a. Clearly define the role of OT and relate it to the activity to the patients.
  - b. Explain the value of activity chosen with respect to client's own life activities/occupations.
  - c. Define the OT process in an effective manner that is understandable to clients, etc.
  - d. Explain to client and family, value of returning to roles, responsibilities to a level of audience understanding.
- 6. Clearly, confidently, and accurately communicates the roles of the occupational therapist and occupational therapy assistant to clients, families, significant others, colleagues, service providers, and the public.**
- Students will:
- a. Articulate the role of occupational therapists and occupational therapy assistants in the Rehabilitation setting to patients, family members, and members of the multidisciplinary team.
  - b. Consistently ask patients/patient's family if there are any questions and if they understand the role of the Occupational Therapist/Occupational Therapy and defines that OT roles/responsibilities may include.
- 7. Collaborate with client, family, and significant others throughout occupational therapy process.**

Students will:

- a. Collaborate with patient, family members and significant others to determine past medical history, personal goals and interests.
- b. Collaborate with other members of the multidisciplinary team to discuss needs and progress of the patient.
- c. Collaborate with patient/family members in order to determine desired functional status at discharge, discharge plans, and future goals (both short-term and long-term).
- d. Collaborate with patient, family, and significant others to train and educate them in available adaptive equipment, durable medical equipment, and home exercise programs.

### **III. EVALUATION AND SCREENING**

- 8. Articulates a clear and logic rationale for the evaluation process.**

Students will:

- a. Recognize the importance of comprehensive evaluation.
- b. Identify the appropriate evaluation tools and provide logical rationale for its use taking into consideration patient's diagnosis, precautions, interests, and goals.

- c. Prioritize specific areas to be assessed, and follows through with assessment(ROM, strength, edema, pain, skin integrity, FMC/GMC, ADL's).
- d. Recognize which information is relevant versus extraneous.

**9. Selects relevant screening and assessment methods while considering such factors such as client's priorities, context(s), theories, and evidence-based practice.**

Students will:

- a. Always collaborate with supervisor in advance regarding possible assessment tools/methods regarding each patient.
- b. Recognize the impact of background information and pre-admission information on evaluation procedure and treatment planning.
- c. Select relevant areas to assess, keeping in mind the patient's developmental level, diagnosis, precautions, and ability to cooperate with assessment.
- d. Select the correct methods to assess the relevant areas using standardized and/or non-standardized procedures.

**10. Determines client's occupational profile and performance through appropriate assessment methods.**

Students will:

- a. Utilize therapeutic use of self in order to gather all information.
- b. Obtain a thorough occupational profile through patient's interview, family interview, and review of medical chart documentation.
- c. Consider patients' cultural background and asks questions to clarify.
- d. Ask clients what areas are important to them.
- e. Gather relevant information from patient, family members, medical records, and members of the multidisciplinary team.
- f. Interview family when unable to directly interview client about his/her occupational profile.
- g. Integrate information obtained and understand its relevance in the patient's assessment.
- h. Demonstrate a working knowledge of available assessment methods.
- i. Consistently use client-centered practice to gather a global understanding of patient's needs.
- j. Investigate patient's goals for self and assesses relevant areas to help patient achieve those goals.
- k. Initiate and integrate patient's occupational profile into patient treatment focus.
- l. Demonstrate knowledge of age-specific and/or functional level performance and/or roles in maintaining and implementing treatment program.

**11. Assesses client factors and context(s) that support or hinder occupational performance.**

Students will:

- a. Demonstrate good working knowledge of the various precautions/diagnosis that may support or hinder performance and which may include, but not limited to:

- i. Cardiac, Sternal, Hip, Joint Protection Techniques, Range of Motion, Falls, Seizure, Cognition, Upper Extremity and Lower Extremity Weight Bearing Status (NWB, TTWB, PWB, WBAT), and medically related items (i.e. 02)
  - ii. Spinal Cord Injury, Traumatic Brain Injury, Cerebral Vascular Accident, General Debility, Parkinson's Disease, Arthritis, Chronic Obstructive Pulmonary Disorder, Multiple Sclerosis, Diabetes.
- b. Identify how above mentioned precautions/diagnoses will/may affect patient's function (i.e. ambulation versus wheelchair use, standing, transfer, equipment use, etc.).

**12. Obtains sufficient and necessary information from relevant resources such as client, families, significant others, service providers, and records prior to and during evaluation process.**

Students will:

- a. Utilize all possible resources to locate patient information.
- b. Competently perform a comprehensive chart review prior to evaluation and treatment planning (i.e. PMH, medications, previous therapy).
- c. Gather complete information from patient, family members, multidisciplinary team members, and medical records while maintaining patient confidentiality.
- d. Be able to identify when additional information will be needed.

**13. Administers assessments in a uniform matter to ensure findings are valid and reliable.**

Students will:

- a. Consult institution manuals and supervisor prior to the administration of standardized tests.
- b. Chose appropriate standardized/non-standardized tests for patient.
- c. Administer standardized and non-standardized assessments in a uniform manner.
- d. Understand the rationale for performing standardized tests.
- e. Prepare assessment environment to facilitate the desired data gathering.
- f. Position patient according to standardized or recommended procedures when possible; documenting deviations from standard procedures.
- g. Explain the purpose/procedures of each assessment tool in a manner conducive to the patient's understanding.
- h. Present standardized test stimuli in recommended order using required phraseology.
- i. Observe time limits, when appropriate.
- j. Make accurate, objective observations during the evaluation process.
- k. Record results of assessments accurately.

**14. Adjusts/modifies the assessment procedures based on client's needs, behaviors, and culture.**

Students will:

- a. Familiarize self with acceptable adaptation of assessment procedures that can be applied without altering validity of test results.

- b. Is prepared for the possibility of adapting assessment based on information gathered regarding the patient's status (condition, developmental level, ability to communicate) and needs.
- c. Document the manner of adaptation used.
- d. Recognizes patient's level of understanding prior to initiating assessment procedures.
- e. Complete assessments according to the patient's tolerance and endurance levels and modify activities as patient's status changes.
- f. Maintain close observation of patient's physical and emotional status and is accepting of patient's physical and emotional changes.
- g. Be able to provide justification for any modification to standard evaluation to fit needs of client.
- h. Distinguish between actual fatigue, uncooperative behavior, and manipulation and modify approach as indicated.

**15. Interprets evaluation results to determine client's occupational performance strengths and challenges.**

Students will:

- a. Consult his/her supervisor prior to making any professional recommendations while regarding evaluation results.
- b. Familiarize self with procedures for interpreting results in valid manner when using standardized tests.
- c. Take into account adaptations used during assessment when interpreting results.
- d. Convert raw scores into meaningful information, according to assessment guidelines.
- e. Identify patient's functional level based on assessment of cognitive skills, general motor abilities, upper extremity function, visual perceptual motor skills, and activities of daily living.
- f. Discuss and accept feedback pertaining to their interpretation of assessment data.
- g. Report assessment and reassessment findings in a concise, accurate, professional, and complete manner, written and/or orally.
- h. Select relevant materials to emphasize when reporting.

**16. Establishes an accurate and appropriate plan based on the evaluation results, through integrating multiple factors such as client's priorities, context(s), theories, and evidence-based practice.**

Students will:

- a. Be able to recognize how the patient's priorities in goal setting may reflect on his/her motivation in therapy and carry through of goals.
- b. Encourage patient involvement in setting goals using functional terms, as appropriate.
- c. Propose measurable and attainable short-term goals that reflect problem areas identified in evaluation.
- d. Show sensitivity and understanding of the patient's perception of appropriate goals while guiding them to set attainable ones.

- e. Consider patient's cultural, socioeconomic background (possible discharge situation, patient's pre-morbid status, and patient's support system) when setting short term and long-term goals.
- f. Maintain professionalism in discussing goals with patient, family, and staff.
- g. Collaborate with multidisciplinary team to ensure holistic treatment of patient.

**17. Documents the results of evaluation process that demonstrates objective measurement of client's occupational performance.**

Students will:

- a. Be sure to document and report evaluation results according to format discussed with the supervisor.
- b. Be sure documentation is accurate, timely, and reflects the results of the evaluation process, noting modifications to evaluation procedure if applicable.
- c. Use medical terminology and accepted abbreviations correctly and appropriately.
- d. Report assessment and reassessment findings in a concise, accurate, and complete manner, written and/or orally.
- e. Use professional behavior when reporting pertinent information regarding treatment planning to other members of the multidisciplinary team.

**IV. INTERVENTION**

**18. Articulates a clear and logical rationale for the intervention process.**

Students will:

- a. Describe to the client/client's family and other professionals the reason why the task is being performed in a manner that the client understands.
- b. Treatment plans reflect patient goal areas as obtained from evaluation, team collaboration and/or patient/family interviews.
- c. Use treatment plan as a reference in planning daily treatment sessions and to self evaluate treatment sessions.
- d. Articulate clear and logical rationale for choice of treatment approach and intervention strategy to supervisor.

**19. Utilizes evidence from published research and relevant resources to make informed intervention decisions.**

Students will:

- a. Demonstrate confidence in completing/discussing research and resources when applicable.
- b. When appropriate, will complete evidence-based practice literature review to support chosen treatment intervention.

**20. Chooses occupations that motivate and challenge clients.**

Students will:

- a. Select activities appropriate for patient's developmental and/or chronological age and physical ability while keeping in mind the patient's pre-morbid status.
- b. Consider appropriateness of activity as it relates to the patient's social/vocational needs and interests/hobbies.

- c. Utilize a variety of resources to select treatment approach.
- d. Involve patient when considering strategies and alternatives.
- e. Consider patient preferences that will motivate and challenge him/her.
- f. Consider a variety of activities and goals identified by other team members to reinforce and incorporate during intervention.
- g. Consider home environment and family responsibilities or routines when developing home programs.
- h. Identify a variety of treatment activities to accomplish goals.
- i. Be able to carry out an accurate analysis of selected activities and explain rationale as it applies to the patient.

**21. Selects relevant occupations to facilitate clients meeting established goals.**

Students will:

- a. Set treatment priorities with input from patient/family and is able to explain rationale at their level of understanding.
- b. Appropriately negotiate and explain priorities with patient/family when there is a discrepancy.
- c. Select activities appropriate for the patient; considering his/her lifestyle and areas of need to become more functional.
- d. Show awareness of potential factors (environment, activity selection, patient/therapist attitude) that can influence patient performance.

**22. Implements intervention plans that are client-centered.**

Students will:

- a. Identify precautions and contradictions applicable to patient/patient medical history.
- b. Identify when education or training is necessary for patient. Provides necessary information according to patient diagnosis and level of understanding.
- c. Recognize the need to describe the treatment program at patient's level of understanding.
- d. Involve patient when considering strategies and alternatives.
- e. Encourage patient's active participation in treatment and provides patient with verbal feedback as to results of treatment session.
- f. Structure activity in accordance with patient-centered treatment goals and select treatment modalities and techniques that best facilitate patient response.
- g. Demonstrate a sequential and timely plan of treatment activities, taking into consideration the functional and emotional needs of the patient.
- h. Adapt the activities to meet the patient's physical, cognitive, or behavioral limitations.
- i. Allow for flexibility in treatment plan.
- j. Be creative with treatment choices.

**23. Implements intervention plans that are occupation-based.**

Students will:

- a. Recognize the need to select treatment modality based upon identified frame of reference.



- b. Select and carry out activities in accordance with selected and identified operational frame of reference.
- c. Be able to provide rationale for activity selections, how it relates to frame of reference and how it applies to the patient.
- d. Prepare for treatment activities ahead of time as needed.
- e. Choose occupational treatments based on long-term goals and short-term goals.
- f. Implement purposeful intervention in collaboration with patient and family up to and including discharge (DME, HEP).

**24. Modifies task approach, occupations, and the environment to maximize client performance.**

Students will:

- a. Demonstrate flexibility and/or resourcefulness in adapting treatment area to maximize patient's functioning.
- b. Select treatment area that most facilitates the completion of treatment session with minimal distraction.
- c. Break activity into sequence of steps appropriate to patient's level of function and awareness.
- d. Explain steps of the activity to the patient.
- e. Demonstrate an understanding of precautions and contraindications by using appropriate therapeutic techniques and modalities and modifying treatment plan accordingly.
- f. Identify how activities can be graded and uses grading when necessary to maximize patient performance.
- g. Identify change in patient's condition and response to treatment and modifies goals to accommodate patient's change in condition.
- h. Accept/respect patient's request for rests/termination of treatment within reasonable limits.

**25. Updates, modifies, or terminates the intervention plan based upon careful monitoring of the client's status.**

Students will:

- a. Understand the responsibility the therapist has for keeping our treatment current and relevant to the patient as they progress.
- b. Identify change in patient's performance and recognize importance of reassessment to document change in the patient (justifies need for continued treatment).
- c. Initiate reassessment at regular intervals.
- d. After re-evaluating the patient's status at appropriate intervals, take the initiative to discuss results with patient/family/members of multidisciplinary team at their level of understanding.
- e. Recognize the importance of readjusting patient's program as they progress.
- f. Modify goals to be realistic and appropriate for patient's needs and interests.
- g. Recognize a plateau in therapy and suggests changes in intervention plan/discussion of discharge date.
- h. Establish discharge and follow-up plans after collaboration with patient/family/multidisciplinary team members and initiates appropriate actions.

- i. Gather current and relevant data in preparation for meetings.
- j. Relate changes in goals to supervising therapist and accepts feedback.

**26. Documents client's response to services in a manner that demonstrates the efficacy of interventions.**

Students will:

- a. Complete all required daily documents, i.e. observation sheets, treatment plans, billing, daily progress notes, etc.
- b. Meet daily deadlines for written work.
- c. Be sure that reports are complete, concise, legible, and follow set guidelines.
- d. Be sure to use medical terminology and abbreviations appropriately.
- e. Written and oral reports accurately reflect patient's status.
- f. Be sure that documentation reflects the efficacy of treatment and need for continued treatment.
- g. Report treatment to patient/staff in an understandable, yet professional way, and in a manner which reflects positively on the profession
- h. Understand the importance of relaying the information to patient/family in a sensitive way and at an appropriate level of their understanding.

**V. MANAGEMENT OF OCCUPATIONAL THERAPY SERVICES:**

**27. Demonstrates through practice or discussion the ability to assign appropriate responsibilities to the occupational therapy assistant and the occupational therapy aide.**

Students will:

- a. Discuss with supervisor and articulate the role of the COTA in rehabilitation setting.
- b. Understand the supervisory role in the context of clinical practice including the use of aides and volunteers.

**28. Demonstrates through practice or discussion the ability to actively collaborate with the occupational therapy assistant.**

Students will:

- a. Discuss with supervisor various situations that might occur in a rehabilitation setting appropriate for a COTA's services.
- b. Effectively communicate/collaborate with COTA's.
- c. Seek assistance from the COTA's when necessary/needed.

**29. Demonstrate understanding of the costs of funding related to occupational therapy services at this site.**

Students will:

- a. Understand the funding for OT services in rehabilitation setting (Medicare, Insurance).
- b. Complete accurate documentation for payment of services.
- c. If necessary, discuss with patient and family cost of DME and AE prior to discharge.

**30. Accomplishes organizational goals by establishing priorities, developing strategies, and meeting deadlines.**

Students will:

- a. Demonstrate appropriate priorities of the practice area, accommodating for varying caseloads and changes in schedules.
- b. Follow facility priorities.

**31. Produces the volume of work required within the expected time frame.**

Students will:

- a. Deliver services expected by the program at a level commensurate to an entry-level therapist.
- b. Successfully treat patient/complete documentation within a given time frame, specifically relating to the Atlantic Physical Therapy and Rehab. OT student time frames.

**VI. COMMUNICATION:**

**32. Clearly and effectively communicates verbally and nonverbally with clients, families, significant others, colleagues, service providers, and the public.**

Students will:

- a. Interact, communicate, and share relevant information with caretakers, patient's family, and members of multidisciplinary team.
- b. Clearly and effectively give instructions, respond to behaviors and questions, give feedback, and give appropriate cues and assistance.
- c. Give instructions for the treatment process that are effective, clear, concise, and understandable for each patient's understanding level and learning style.
- d. Respond appropriately to behaviors and questions, give feedback, appropriate cues, and the appropriate amount of assistance to enable each patient to participate in the chosen activity.
- e. Develop boundaries/demonstrates ability to set appropriate limits with patients.
- f. Be aware of nonverbal communication and body language of clients, families, and colleagues.
- g. Show appropriate emotion for appropriate articulations – through body language, facial expression, and verbal feedback.
- h. Demonstrate good observational skills when communicating with patients, adjusting instructions based on patient's reactions.
- i. Provide honest feedback without giving false hopes.
- j. Demonstrates active listening skills during interactions.
- k. Learn to use and develop therapeutic use of self and maintain rapport with patient.
- l. Recognize that patient's response to therapist and treatment may vary.
- m. Demonstrate good observational skills when communicating with patients, adjusting instructions based on patients' reactions.
- n. Communicate information in a professional manner and is aware of "team approach" concept when doing so.
- o. Accept constructive feedback/criticism and provide input as part of interpersonal communication.

- p. Clearly and effectively write progress reports based upon and related to changes in a patient's progress and needs.
- q. Refer questions beyond the scope of OT to the appropriate source.

**33. Produces clear and accurate documentation according to site requirements.**

Students will:

- a. Complete accurate documentation following each treatment session
- b. Be sure that evaluation produces clear and measurable goals.
- c. Complete accurate documentation for insurance reimbursement.
- d. Make sure that supervisor, or other accepted OTR acting as supervisor, signs all documentation.
- e. Use appropriate medical terminology and abbreviations in all documentation, and use only those of which are accepted as appropriate by the Outpatient Rehabilitation facility's regulations.

**34. All written communication is legible, using proper spelling, punctuation, and grammar.**

Students will:

- a. Produce legible handwritten or computer-generated documents using proper spelling, punctuation, and grammar, and appropriate abbreviations.
- b. Consistently sign documentation in the same manner.

**35. Uses language appropriate to the recipient of the information, including but not limited to funding agencies and regulatory agencies.**

Students will:

- a. Use appropriate language when addressing the patient.
- b. Use appropriate language when addressing members of patient's family.
- c. Use appropriate language when addressing members of the multidisciplinary team.

**VII. PROFESSIONAL BEHAVIORS:**

**36. Collaborates with supervisor(s) to maximize the learning experience.**

Students will:

- a. Recognize own strengths and weaknesses.
- b. Generate specific concerns prior to supervisory sessions.
- c. Openly communicate concerns/problems during meetings with supervisor.
- d. Initiate supervisory process when necessary – incorporating feedback into daily routine.
- e. Collaborate with supervisor regarding appropriate treatment planning, scheduling issues and student projects.
- f. Inform supervisor of any changes in schedule or patient performance.
- g. Identify problems and accept responsibility for generating viable solutions.
- h. Collaborate with supervisor regarding completing documentation, knowledge of noted precautions and diagnosis, and working as a multidisciplinary team member.

- i. If time permits, consult supervisor regarding possible tasks that could be completed.
- j. Collaborate with supervisor when ready to assume more responsibility and/or when requiring less supervision.
- k. If supervisor is not present, always demonstrate knowledge of who is acting supervisor at that time, and seek him/her out if needed.

**37. Takes responsibility for attaining professional competence by seeking out learning opportunities and interactions with supervisor(s) and others.**

Students will:

- a. Show an interest in following/shadowing other professionals.
- b. Consults with other members of multidisciplinary team
  - i. Physical Therapists, Doctors, Case Management, Nurses, Nursing Aides.
- c. Approach other members of multidisciplinary team for co-treatment sessions if applicable.
- d. Attend meetings held by the multidisciplinary team.

**38. Responds constructively to feedback from multidisciplinary team members and takes initiative to modify their behavior.**

Students will:

- a. Notice and respond to feedback in a way that would encourage an open exchange of ideas and the development of entry-level skills in an effective way.
- b. Understand and act upon constructive feedback from supervisor by making suggestions as to what could have been done or what needs to be changed.
- c. Generalize supervisor's suggestions to other situations.
- d. Verbalize understanding of feedback and develops effective and measurable goals for improvement as needed.
- e. Demonstrate change of behavior that shows an understanding of feedback and a movement towards acquiring professional behaviors.
- f. Articulate positive feedback and strengths pointed out by supervisor.
- g. Demonstrate a positive attitude evidenced by body language and use of voice.

**39. Demonstrates consistent work behaviors including initiative, preparedness, dependability, and work site maintenance.**

Students will:

- a. Always consult supervisor before preparing any fieldwork assignment/presentation.
- b. Be sure to have supervisor's approval of all assignments/presentations.
- c. Provide supervisor with a copy of assignment/presentation in advance, in case any changes are felt to be necessary.
- d. Prepare treatment plans in advance, planning enough activities for the whole treatment session.
- e. Prepare projects/presentations in advance – including reserving equipment, rooms, and preparing paper copies.

- f. Consistently complete all necessary patient documentation in a complete and timely fashion.
- g. Arrive on time daily or call supervisor in the case of a call off.
- h. Wear professional attire with adherence to the facility's dress code policy.
- i. Maintain a clean and orderly work area during and after each session.

**40. Demonstrates effective time management.**

Students will:

- a. Prioritize criteria for evaluation and goals during treatment sessions.
- b. Schedule and complete student projects, patient treatment sessions, meetings, and documentation in a timely fashion.
- c. Plan daily schedule based on assigned caseload.
- d. Establish priorities in the workload.
- e. Begin and end treatment sessions on time.
- f. Consistently attend meetings on time.
- g. Use free time constructively.
- h. Request additional responsibilities as free time becomes available.

**41. Demonstrates positive interpersonal skills including but not limited to cooperation, flexibility, tact, and empathy.**

Students will:

- a. Always maintain a positive attitude while working with patients/patient's family and other members of the multidisciplinary team.
- b. Recognize that unplanned circumstances may arise that requires a schedule readjustment.
- c. Establish rapport with all patients/patient's family and members of the multidisciplinary team.
- d. Maintain an atmosphere conducive to positive interactions.
- e. Demonstrate flexibility with interactions and situations without compromising the student program.
- f. Demonstrate positive interpersonal skills including but not limited to cooperation, flexibility, tact and empathy towards patients, family members, and multidisciplinary team members.

**42. Demonstrates respect for diversity factors of others including but not limited to socio-cultural, socioeconomic, spiritual, and lifestyle choices.**

Students will:

- a. Always demonstrate respect for beliefs/rights of all patients/patient's families, and all members of the healthcare team.
- b. Demonstrate respect for patients, patient's families, and hospital personnel without prejudging or making assumptions about the family environment, culture, spirituality, life style choices, etc.
- c. Treat everyone just the way you would want to be treated.