Title	Four Weeks	Eight Weeks	Twelve Weeks
Self- Assessment/	Consistently uses weekly review form and with CI guidance identifies general areas	Demonstrates accuracy in weekly self- assessment, beginning to lead weekly	Consistently directs weekly CI-student meeting
Reflection	for improvement.  With supervision from CI, begins to generate questions that demonstrate ability to think beyond "tasks" to clinical reasoning process.	goal meetings and identify areas for development  Beginning to reflect across patients and describe similarities and differences in approach with guidance	Consistently reflects across patients and describe similarities and differences in approach demonstrating improved clinical reasoning and understanding of patient population.
Professional Behaviors	Identifies knowledge deficits and resources with Clinical Instructor's guidance.  Consistently reviews new diagnosis and looks up medications	Routinely identifies and follows up on areas where there are knowledge deficits.	Initiates use of a variety of resources to fill knowledge gaps
	Applies general information learned from one situation to a similar situation  Maintains professional boundaries with with patients and families	Recognizes when boundaries are being challenged and seeks guidance for management	Developing skills in being able to manage boundary issues "in the moment"
Patient Rapport	Consistently introduces self to patient/family and provides basic explanation of role of OT on MH unit  With CI supervision begins to articulate the identification of emotional and sensory states and development of self	Articulates to patient/family the role of occupation in MH treatment  Communicates with patient and staff around identification of emotional and sensory states and development of selfmanagement strategies with CI	For all patients, articulates the role of patient education around identification of emotional and sensory states and development of self-management strategies
	management strategies for common psychiatric diagnosis.  Identifies barriers to communication/ participation with CI guidance for routine situations	guidance as needed  With supervision as indicated, modifies approach to patient based on understanding of their interpersonal style and barriers to engagement	Modifies approach to patient based on understanding of interpersonal style and barriers to engagement with guidance as indicated

Title	Four Weeks	Eight Weeks	Twelve Weeks
Advocacy	Listens and attends to patient's/families' concerns	With guidance, recognizes when team/patient/physical therapy goals are not in synch and with seeks assistance of CI to develop advocacy plan	With guidance as indicated, advocates for specific patient's needs with team members
	With supervision, identifies when patient/family concerns may benefit from resources outside occupational therapy	With guidance, describes variety of resources available to meet patient's needs	
Culture	With assistance, discusses "culture" in context of impact of disease/injury hospitalization on patient's life roles	With supervision, identifies ways that "culture" impacts engagement/ participation in occuapational therapy and modifies OT approach to meet "cultural" needs	Recognizes when approach needs to be modified to meet culture needs and seeks assistance as needed to modify
Safety	Consistently observes and monitors environment for safety risks (sharps, locking doors and drawers, etc)  Adheres to unit policies/procedures ( ICU restrictions, priviledges, etc)	Accurately monitors patient verbal and non- verbal behaviors during treatment to maintain safety	Recognizes changes in status that could impact safety and modifies treatment within the moment
	With guidance, develops and implements a plan to monitor/maintain safety  With guidance recognizes when information from chart, electronic tools, interview may represent safety concerns	Identifies new/unfamiliar components of medical record/environment and suggests possible ways to maintain safety with Clinical Instructor guidance	
Clinical Knowledge/ Decision Making	<ul> <li>With guidance:         <ul> <li>uses data from chart and team to plan subjective examination</li> <li>identifies relevant tests and measures</li> </ul> </li> </ul>	With intermittent guidance:  • reviews aspects of chart/electronic data and gathers team data to determine appropriateness for OT	Reviews chart/electronic data to focus OT examination  Selects appropriate test/intervention to assess pt's abilities and needs, seeks
<b>Use of Medical</b>	identifies impact of medications on	examination	out guidance from CI as needed

Title	Four Weeks	Eight Weeks	Twelve Weeks
Record/ Electronic Data	patient presentation	<ul> <li>determines which definitive tests are needed</li> <li>aniticipates the impact of medications on patient presentation and performance</li> </ul>	
Subjective Interview	With guidance, interviews patient and gets sufficient data to complete occupational profile  Identifies barriers that may impact	Modifies questions to get full set of data and develop an examination plan  Recognizes when questioning is not	Uses effective listening to modify questions to get more specific level of data >75% time  Modifies approach "in the moment" that
	participation in examination /intervention	effective in getting data and seeks guidance as indicated	results engagement of patient and collection of pertinent information
Objective Examination	Completes occupational profile and minimal data set with occasional guidance  With supervision, completes definitive testing for familiar situations including:  • ACLS, SMST, Leisure interest check list, KTA, CAM, OTAPS, COPM MET.	Completes occupational profile and minimal data set for familiar patients guidance/supervision for more complex patients  With guidance as indicated completes definitive testing including:  • ACLS, SMST, Leisure interest check list, KTA, CAM, MET, COPM, OTAPS.  With guidance, recognizes need to modify examination and with guidance/supervision executes exam modification	Data collected during examination guides modifications of examination plan "in the moment"  Data collected is now thorough and reliable to allow for development of evaluation  Consistently modifies exam and seeks assist to modify in unfamiliar/complex situations as indicated
Evaluation	With guidance/supervision interprets data and describes strengths and weaknesses that impact patient participation in life roles	Prioritizes factors that limit participation in life roles to help develop plan of care	Interpretation of data collected consistently drives decision making in development of POC
POC	With guidance, develops realistic ST goals	Develops realistic ST goals, seeking out	Identifies evidence to support decisions

Title	Four Weeks	Eight Weeks	Twelve Weeks
	in conjunction with patient	guidance	and with guidance applies to case at hand
	With supervision, develops basic plan for treatment session	Develops plan for treatment session	Initiates re-examination in a timely manner, modifies plan, and presents
		With guidance incorporates evidence into POC	revised plan to patient - seeks guidance from CI as needed for complex patients/situations
		Based on re-examination, reviews intervention plan and seek CI guidance as needed to modify plan	
Intervention	Safely performs familiar treatment interventions	With guidance as needed, grades activities to create "just right challenge"	Chooses occupations/activities that meaningful to the patient at the "just right challenge level"
	With guidance, selects occupations/activities that are patient driven and client specific including:  Groups Sensory diet	Prior to treatment, develops alternative intervention plan in event it does not work	Grades activities to meet changing level needed to challenge the patient
	<ul> <li>Sensory modulation tool kit</li> <li>Skill building work sheet</li> <li>Journaling</li> <li>Art Activities</li> <li>Graded relaxation</li> <li>ADL treatment</li> </ul>	Recognizes when intervention is not effective and modifies with guidance as needed	Recognizes intervention plan is not effective and begins to modify during session
	Begins to recognize when intervention is not effective and hypothesize why and methods to adapt		
Group Skills	With guidance:  Consistently introduce self, communicate purpose, behavioral expectations, ground rules, and time frames for the group at the	Redirect disruptive behaviors 60% of the time	Consistently manage disruptive behaviors with guidance for complex situations
	beginning of each session	Develops group interventions and leads	Develops group interventions and leads

	Hental Health Level ii Outcomes		
Title	Four Weeks	Eight Weeks	Twelve Weeks
	<ul> <li>Identify disruptive behaviors in group setting and seek assistance to manage</li> <li>Based on diverse levels within group, adapt group approach</li> <li>Use active listening skills to assist in developing questions for the group and responding to the group process</li> <li>Prepare all materials for the group prior to the beginning</li> </ul>	groups independently, seeking support/guidance of CI as needed	groups independently, modifying intervention as indicated within group session.
Teamwork/ Collaboration, Interdisciplinary	Describes floor organization/ hierarchy, team member roles  With assistance, develops collegial relationships  Consistently interacts with nurse, case manager, and other disciplines with quidance	Identifies need to involve team and with guidance, presents patient's needs to team members	Carries out team's interactions and seeks assistance in situations of potential conflict
Productivity	Participates in assigned groups/meetings with guidance. Leads one group daily with supervision	Participates in assigned meetings. Leads one to two groups daily with seeks out guidance as needed	Participates in assigned meetings. Leads one to two groups daily
	Completes 1 treatment/evaluation daily	Sees 1 patient/evaluation daily	Sees 1-2 patients/evaluations daily