**Occupational Therapy Professional Development Assessment**

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| **Professional****Competencies** | **Does Not Meet Competencies** | **Minimum Competency** | **Competent****Plus** |
| Dependability | Excessive absence or frequent tardiness.[ ]  | Regular attendance and on time for class. Does not leave early.No more than 2 unexcused absences and /or tardies per semester.[ ]  | Shows initiative by giving more time than designated for class and clinic placement.[ ]  |
| Demonstrates responsibility and punctuality to class and clinical placements. |
| Comments: |
| Professional Presentation | Body posture and affect communicates disinterest or disengagement.Attire and/or personal hygiene does not meet school or clinic standards.[ ]  | Body posture and affect communicates interest.Attire and personal hygiene meet school and clinic standards.[ ]  | Body posture and affect communicates enthusiasm for the profession. Desire to become an occupational therapist is outwardly evident.[ ]  |
| Presents oneself in a manner that is accepted by peers, faculty, clinical supervisors, clients, and employers. |
| Comments: |
| Supervisory Process | Argues and/or dismisses feedback. Does not follow through on suggestions for improvement.[ ]  | Receptive and responsive to suggestions/positive attitude.Embraces feedback as a means to improve professional presentation of self.[ ]  | Independently initiates appropriate professional development strategies.[ ]  |
| Reacts favorably to faculty feedback of classroom and clinic behavior. |
| Comments: |
| Cooperation | Participates positively in team interaction but does not initiate interaction. Waits to be assigned group role/responsibility.Expresses negative attitude toward team or group work.[ ]  | Respects others’ opinions/supports group-problem solving/encourages positive interaction/ maintains confidentiality.[ ]  | Independently initiates cooperative strategies to facilitate group success.Volunteers for leadership roles in team or group work.[ ]  |
| Demonstrates appropriate collaborative behavior with classmates and professionals. |
| Comments: |
| Organization and Time Management | Assignments are generally late or incomplete.Not prepared for clinic sessions.[ ]  | Assignments are submitted on time and meet minimum requirements. Comes to clinic prepared with one or two interventions, but may have difficulty with “on the spot” creativity.[ ]  | Demonstrates initiative, resourcefulness, higher level thinking, and creativity in coursework and clinical situations. Capable of generating “on the spot” ideas that enhance client participation.[ ]  |
| Demonstrates organization and effort. Strives for excellence in all coursework and clinical placements. |
| Comments: |
| Initiative | Minimal effort and/or enthusiasm toward coursework or clinical placements.Complains about assignments.Verbalizes and/or shows non-verbal signs of disinterest or disapproval.[ ]  | Demonstrates effort and interest in coursework and clinical placements.[ ]  | Consistently maintains high interest and enthusiasm in ALL coursework and clinical placements.[ ]  |
| Expresses enthusiasm and interest in coursework and clinical placements. |
| Comments: |
| Empathy | Engages in "gossip". Complains about school problems, faculty, and/or challenging clients and their families.Lacks empathy.[ ]  | Attempts problem solving and is not involved in negative communication about the school and/or clients and their families.Demonstrates empathy.[ ]  | Classmate, faculty, and client advocate. Proactive in seeking solutions for school problems and/or challenging clients and their families. Renders assistance to ALL individuals without bias or prejudice.[ ]  |
| Demonstrates cooperative, ethical, and culturally competent professional concern for classmates, faculty, clients, and families. |
| Comments: |
| Clinical Reasoning | Rarely asks questions in class or inquiries about professional solutions. Offers ideas and solutions that are not appropriate and/or outside the scope of practice.[ ]  | Questions, inquiries, and solutions are appropriate for the scope of practice.[ ]  | Demonstrates advanced reflection, creativity, and breadth of clinical reasoning skills. Innovative solutions are appropriate for scope of practice.[ ]  |
| Demonstrates the ability to analyze, synthesize, interpret, and communicate information correctly in order to make clinical decisions. |
| Comments: |
| Verbal Expression | Never verbally interacts in class or clinic. Will only interact when called upon and provides superficial responses.Verbally interacts with classmates, faculty, supervisors, and clients in an offensive or threatening manner.[ ]  | Verbally interacts in class or clinic with clarity and quality of content every week. Most verbal interactions do not require prompting from faculty or clinic supervisor.[ ]  | Consistently interacts in class or clinic without prompting from another. Attempts to encourage others to participate in class or clinic discussion.Class and clinic interactions are of high quality.[ ]  |
| Demonstrates appropriate professional verbal communication. |
| Comments: |
| Written Expression | Written communication is unclear and/or superficial.Written communication does not include correct punctuation and grammar. Written work does not follow APA format. Deliberate plagiarism is noted in written work. Clinic notes include inaccurate information. Clinic notes do not meet standards for reimbursement.[ ]  | Written communication is clear and concise. Written communication includes correct punctuation and grammar.All written work follows APA format. Citations may need some corrections, but plagiarism is not deliberate. Clinic notes meet standards for reimbursement.[ ]  | Written communication is of excellent quality. Author provides in-depth reflection and creative solutions. Clinic notes exceed standards for reimbursement and demonstrate high level client advocacy.[ ]  |
| Demonstrates appropriate professional written communication. |
| Comments: |