

## AOTA FIELDWORK DATA FORM

Date: 03/15/2021

Name of Facility: Vanderbilt University Medical Center

Address: 1313 21st St Ave S. Rm 1004 Oxford House

City: Nashville State: TN

N **Zip:** 37232-4675

FW Level II			W Level I (if different)			
Contact Person:			We do not take any level I students.			
		V	we do not take any leve	i i stut	ients.	
Lynette O'Brien OTR/L						
Jim Lassiter OT/L						
Elise Foust COTA/L						
Phone: Office phone: 615-343-635	4					
E-mail:						
lynette.m.o.brien@vumc.org						
jim.lassiter@vumc.org						
Elise.m.foust@vumc.org						
Director: Heather Skaar, PT,		C	Corporate Status:	Prefe	rred Sequence o	of FW: ACOTE Standards B.10.6
Manager: Kelly Floyd, MS, OTR/L			] For Profit	🛛 An	y	
		-	Non-Profit		cond/Third only;	
Web site address:		-	∃ State Gov't			Part-time option
web site address:		L	] Federal Gov't		efer Full-time	
https://www.vumc.org/rehab-serv	vices/welcome					
OT Fieldwork Practice Settings (AC (Double Click on boxes to check)	-					
Hospital-based settings	Community-based settings		School-based setting	rs	Age Groups:	Number of Staff:
☑ In-Patient Acute 1.1	Peds Community 2.1		Early Intervention		0-5	OTRs: 26
☐ In-Patient Rehab 1.2	Behavioral Health Community 2	.2	School 3.2		 6-12	COTAs: 4
SNF/ Sub-Acute/ Acute Long-	Older Adult Community Living 2	.3			🖾 13-21	Aides: 2
Term Care 1.3	Older Adult Day Program 2.4		Other area(s)		🛛 22-64	PT/PTA: >30
General Rehab Outpatient 1.4	Outpatient/hand private practic	e 2.5	please specify:		⊠ 65+	Speech: Unknown
Outpatient Hands 1.5	Adult Day Program for DD 2.6					(Numerous)
Pediatric Hospital/Unit 1.6	Home Health 2.7					Resource Teacher: 0
Peds Hospital Outpatient 1.7	Peds Outpatient Clinic 2.8					Counselor/Psychologist:
In-Patient Psych 1.8						Yes: Unknown
						(Numerous)
						Other: N/A
Student Requirements/Prer						
(Double Click on boxes to check)		_	alth requirements:			
Adult CPR	First Aid		□ Physical Check up		neck up	
Criminal Background Check	Infection Control				⊠ Varicella	
Child Protection/abuse check			Tetanus		🛛 Influenza	
Adult abuse check	HIPAA Training		Chest x-ray		Diana II i	, ath an an an day of the
Fingerprinting	Prof. Liability Ins.		Drug screening			y other requirements:
	Own transportation	_	#Panel			has a Health Screening
	□ Interview	$\bowtie$	TB/Mantoux			st be completed. Please
						services website for this
					form**	



Aspects of Occupational Therapy's Domain addressed in this setting (check all that apply) Double Click on boxes to check						
*Refer to the OT Practice Framework –II (2008) for descriptions and definitionsavailable through AOTA						
Areas of Occupation	Performance Skills	Context and Environment				
Activities of Daily Living (ADL)	Sensory-Perceptual Skills	🛛 Cultural				
🖾 Instrumental ADL	Motor and Praxis Skills	🛛 Personal.				
Rest and Sleep	Emotional Regulation Skills	🛛 Physical				
🖾 Education	⊠ Cognitive Skills	🗆 Social				
🗋 Work	Communication and Social Skills	Temporal.				
🗋 Play		🗌 Virtual				
🗌 Leisure						
Social Participation	Performance Patterns	Activity Demands				
	🗖 Habits	Objects used and their properties				
Client Factors	⊠ Routines	Space Demands				
Values, Beliefs and Spirituality	Roles	Social Demands				
Body Functions	☐ Rituals	Sequencing and Timing				
🖾 Body Structures		Required Actions				
		Required Body Functions				
		Required Body Structures				

Most common services priorities (check all that apply)					
(Double Click on boxes to check)					
Direct service	Meetings(team, department, family)	Consultation	🛛 Billing		
🛛 Discharge planning	☑ Client education	In-service training	🛛 Documentation		
Evaluation	☑ Intervention				

Types of OT Interventions addressed in this setting (check all that apply): \* ACOTE Standards A.5.3, B.10.1, B.10.3, B.10.11, B.10.13, B.10.15, B.10.19, B.10.20

Areas of Occupation addressed in th	is setting - within client's own environmental context	t (check all that apply):
(Double Click on boxes to check)		
Activities of Daily Living (ADL)	Instrumental Activities of Daily Living (IADL)	Education
⊠ Bathing/showering	Care of others (selecting/supervising	Formal education participation
Bowel and bladder mgmt	caregivers)	Informal personal educational needs or interests
🖾 Dressing	□ Care of pets	exploration
Eating	Child rearing	Informal personal education participation
🖾 Feeding	Communication management	
🛛 Functional mobility	Community mobility	<u>Work</u>
Personal device care	🖾 Financial management	Employment interests & pursuits
Personal hygiene & grooming	🖂 Health management & maintenance	Employment seeking and acquisition
Sexual activity	Home establishment & management	Job performance
🖾 Toilet hygiene	Meal preparation & clean up	Retirement preparation & adjustment
	Religious observance	Volunteer exploration / participation
Rest and Sleep	Safety procedures & emergency maintenance	
🗌 Rest	Shopping	Social Participation
□Sleep		🗌 Community
□Sleep preparation	<u>Leisure</u>	🗖 Family
□Sleep participation	Leisure exploration	Peer/friend
	Leisure participation	
Play		
Play exploration		
□ Play participation		
Types of Occupational Therapy		

**Interventions:** (Double Click on boxes to check)

☑ Occupation-based Intervention – client engages in client-directed occupations that match identified Preparatory Methods – practitioner selects directed methods and techniques that prepare the client for occupational performance.

☑ <u>Education Process</u> – imparting knowledge and information about occupation, health and participation that does not result in actual



goole			norformance of the accuration (activity
goals	☑ Consultation Process – usi	ng knowledge and	performance of the occupation/activity
Purposeful Activity- client	expertise to collaborate with t		□ <u>Advocacy</u> – efforts directed toward promoting
engages in specifically selected			occupational justice and empowering clients to seek
activities that allow the client to			and obtain resources to fully participate in their daily
develop skills that enhance			life occupations
occupational engagement			
Method of Intervention	<b>Outcomes of Intervention</b>		Theory/ Frames of Reference/ Models of Practice
Direct Services/case load for entry-	Occupational performance		🛛 Biomechanical
level OT	Adaptation		Cognitive - Behavioral
One-to-one:	Health & Wellness		Cognitive Disability
□ Small group(s):	Participation		Model of Human Occupation (MOHO)
Large group:	□ Prevention		Occupational Adaptation
Discharge Outcomes of clients	Quality of Life		Person/ Environment/ Occupation (P-E-O)
-	Role Competence		Person-Environment-Occupational Performance
☐ Home ☐ Another medical facility	Self-Advocacy		(PEOP)
— ,	Occupational Justice		Rehabilitation
☑ Home Health/Inpt/SNF			Sensory Integration
			□ Social Learning Theory
OT Intervention Approaches			☐ Stages of change/Transtheoretical Model
⊠ Create, promote (health			
promotion)			
Establish, restore, (remediation)			
🗌 Maintain			Other (please list):
Modify, (compensation,			
adaptation)			
Prevent, (disability prevention)			
	-		at an informal facility developed evaluation is used by
staff. Therapists at times will use the Pill	Box Test, Medi-Cog, MOCA, SL	UMS, Short Blessed et	c. Documentation is computerized (EPIC).
Identify safety precautions important a (Double Click on boxes to check)	t your FW site		
Medications	□ Swa	llowing/ choking ris	ks
Post-surgical (list procedures)			ilege level (locked areas, grounds)
Contact guard for ambulation		rps count	
🔀 Fall risk	1:1	safety/ suicide preca	autions
Other (describe):			
	·	· · · · ·	
	-		specific evaluations and interventions used in your over point presentations to send and may require the
student to perform literature reviews at			
		,	
Target caseload/ productivity for fig	eldwork students:		requency/ Format (briefly describe) :
(Double Click on boxes to check) Productivity % per 40 hour work we	ek: Not calculated See	(Double Click on bo	
comments below.	ek. Not calculated. See		Medical Records: EPIC
Caseload expectation at end of FW:	Up to 7 patients a day	Time frame require	ements to complete documentation: Same day as
-	. ,	the evaluation or t	
Productivity % per 8 hour day: 5-7 p	atients and 16 units a day		
during the last 2 weeks of the clinica	-		
functioning expectation in this settin	ng. Per 10 hour day 7-8		
patients and 16+ units.	L - F FIM ( No. 4		
# Groups per day expectation at end	i of FW: None		



Administrative/ Management duties or responsibilities of the OT/ OTA student:	Student Assignments. Students will be expected to successfully complete:
<ul> <li>Schedule own clients</li> <li>Supervision of others (Level I students, aides, OTA,</li> </ul>	Research/ EBP/ Literature review In-service or project determined between the student and FE.
volunteers)	Case study Participate in in-services/ grand rounds
Procuring supplies (shopping for cooking groups, client/	Fieldwork Project ( describe):
Participating in supply or environmental maintenance	Observation of other units/ disciplines
Other: Ordering adaptive equipment for patients	project is expected of the student. FE will assist the student in the
Procuring supplies (shopping for cooking groups, client/ intervention related items)	<ul> <li>Fieldwork Project ( describe):</li> <li>Field visits/ rotations to other areas of service</li> <li>Observation of other units/ disciplines</li> <li>Other assignments (please list): Either a case study, in-service or</li> </ul>

Student work schedule & outside study	1		
<b>expected:</b> (Double Click on boxes to check)		Describe level of structure for student?	Describe level of supervisory support for student?
Schedule hrs/ week/ day: 40+ hours a week	Room provided 🔲 YES	🔀 High	🔀 High
	NO NO		
	Housing list provided with		
	rooms for \$500+ a month (will		
	provide if requested).		
Do students work holidays and weekends?	Meals 🗌 YES 🔀 NO	Moderate	Moderate
🔀 YES	10% discount in cafeteria		
□ NO			
Do students work evenings? 🛛 YES	Stipend amount: 0	Low	Low
	Describe public transportation		
Acceptable Dress Code for the site: Solid	available: MTA bus at no		
colored scrubs and tennis shoes. No lab coat A name tag will be provided.	<ul> <li>charge. A shuttle bus free of</li> </ul>		
A name tag will be provided.	charge from satellite parking		
	lot to the hospital is provided.		
Describe the FW environment/ atmosp	0		
Supervisory patterns–Description			
1:1 Supervision Model: At time	s the student may be supervised b	by another therapist (ie. Your FWE is	s on vacation or out sick)
Multiple students supervised by	y one supervisor:		
Collaborative Supervision Mode	<u>ا:</u>		
Multiple supervisors share supervisors	ervision of one student, # supervis	sors per student:	
Non-OT supervisors:			

ACOTE Standards Documentation for Fieldwork (may be completed by AFWC or FWII student interview of FW Educator)

Please answer as many of these as you can. When possible, the AFWC may interview you to answer questions.

1.	Please complete the Occupational Therapy Staff Profile form (see last page) ACOTE Standards B.7.10, B10.12, B.10.17 (Double Click on boxes to check)
Will	I the student(s) be supervised by a currently licensed or credentialed occupational therapist who has a minimum of 1 year of practice
exp	erience subsequent to initial certification, and is adequately prepared to serve as a fieldwork educator? 🛛 Yes 🗌 No

2. The fieldwork agency must be in compliance with standards by external review bodies. Please identify external review agencies involved with this fieldwork setting and year of accreditation: (Double Click on boxes to check)

🖂 јсано	Dept of Health	Year of most recent review: 2019
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	CARF	Dept of Mental Health		Other (specify)
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#### 3. Describe the fieldwork site agency stated mission or purpose. ACOTE Standards B.10.1, B.10.2, B.10.3, B.10.4, B.10.14, B.10.15

## <u>Credo</u>

#### I make those I serve my highest priority:

• promote the health and well-being of all patients who seek care at Vanderbilt

· support trainees in all of their academic endeavors

 respect colleagues and those we serve who differ by gender, race, religion, culture, national origin, mental and physical abilities and sexual orientation and treat them with dignity, respect and compassion

recognize that every member of the Vanderbilt team makes important contributions

• ensure that all team members understand overall team goals and their roles

• answer questions posed by patients, trainees or staff to ensure understanding and facilitate learning

### I have a sense of ownership:

• take any concern (real, perceived, big, or small) seriously and seek resolution or understanding - ask for help if the concern is beyond ability or scope of authority

• approach those who appear to need help or be lost and assist/direct them appropriately

• clean up litter, debris and spills promptly or notify the best resource to keep the medical center environment clean and safe

• remain conscious of the enormous cost of health care, teaching and research and optimize resources while delivering exemplary service

## I conduct myself professionally:

• recognize the increasing diversity of our community and broaden my knowledge of the cultures of the individuals we serve

• adhere to department and medical center policies such as smoking, attendance and dress code

• refrain from loud talk and excessive noises - a quiet

environment is important to heal, learn and work

• discuss internal issues only with those who need to know and refrain from criticizing Vanderbilt in the workplace and in the community

• continue to learn and seek new knowledge to enhance my skills and ability to serve

• strive to maintain personal well-being and balance of work and personal life

### I respect privacy and confidentiality:

• only engage in conversations regarding patients according to

- Vanderbilt policies and regulatory requirements
- discuss confidential matters in a private area
- keep written/electronic information out of the view of others

• knock prior to entering a patient's room, identify myself, and ask permission to enter

• utilize doors/curtains/blankets as appropriate to ensure privacy and explain to the patient why I am doing this, ask permission prior to removing garments or blankets

#### I communicate effectively:

• introduce myself to patients/families/visitors, colleagues

• wear my ID badge where it can be easily seen

• smile, make eye contact, greet others, and speak in ways that are easily understood and show concern and interest; actively listen

• recognize that body language and tone of voice are

important parts of communication

 $\bullet$  listen and respond to dissatisfied patients, families, visitors and/ or colleagues

• remain calm when confronted with or responding to pressure situations

#### I am committed to my colleagues:

• treat colleagues with dignity, respect and compassion; value and respect differences in background, experience, culture, religion,



and ethnicity

• contribute to my work group in positive ways and continuously support the efforts of others

• view all colleagues as equally important members of the Vanderbilt team, regardless of job, role or title

- promote interdepartmental cooperation
- recognize and encourage positive behaviors
- provide private constructive feedback for inappropriate

## Mission

Through the exceptional capabilities and caring spirit of its people, Vanderbilt will lead in improving the healthcare of individuals and communities regionally, nationally and internationally. We will combine our transformative learning programs and compelling discoveries to provide distinctive personalized care.

## 4. A. INTEGRATION OF CURRICULUM THEMES (ACADEMIC PREPARATION)

Please identify the <i>extent of opportunities</i> that students will have to incorporate the following themes in occupational therapy practice during the fieldwork experience						
	1	2	3	4	5	
A. CLINICAL EXCELLENCE				х		
B. SCHOLARSHIP		х				
C. LEADERSHIP			х			
D. SERVICE			х			

### <u>Please check all that apply (below) to identify "supports" to practicing curricular themes above:</u> (Double Click on boxes to check) Supports for clinical excellence:

🔀 Students are encouraged to enable the client to participate in meaningful and purposeful occupations through best practice

- Students are encouraged to implement clinical reasoning, utilization of evidence, currency in practice, clinical skills and client-centeredness Other: (please describe)
- Supports for scholarship:
- Professional development through scholarship is valued by the fieldwork facility and practitioners who serve as role models
- The facility's environment promotes professional development through scholarship
- Time is allotted for activities that promote scholarship
- Other: (please describe)

## Supports for service:

- Employees/students are encouraged to be involved in service to strengthen community
- Students are encouraged to be advocates for the clients served
- Other: (please describe)

### Supports for leadership:

- $\boxtimes$  Students are encouraged to collaborate with other disciplines
- Students are encouraged to understand clients of different cultures as this is a leadership imperative
- Other: (please describe)

### 4. B. Describe how psychosocial factors influence engagement in OT services? (Double Click on boxes to check)

- Discouraged or depressed may not want to participate.
- Encouragement/attention from therapist prompts greater participation
- Depressed may try to withdraw from activities/staff/treatment 🔲 OT is hopeful the patient may exhibit good effort and energy.
- Positive feelings contribute to greater compliance.
- Other (please explain)

4. C. Describe how you address client's community based needs in your setting? (Double Click on boxes to check)



$\boxtimes$	Refer to social	worker/case	manager when	appropriate
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Provide resources/catalogs/written information for needed equipment, supplies as appropriate

Provide names/written materials for community support groups as appropriate

- Refer to appropriate facility community groups when needed
- Instruct client in finding appropriate resources
  - Provide referral to other community services as needed
- Other (please describe)
- 5. Please describe the FW Program & how students fit into the program. (Double Click on boxes to check) ACOTE Standards B10.2, B.10.3, B.10.5, B.10.7, B.10.13, B.10.19, B.10.20, b.10.21
- Fieldwork Program has been in place many years with multiple schools and therapy levels (OT and OTA)
- Fieldwork Program is relatively new and still evolving currently takes students from OT or OTA schools.
- Fieldwork Program just took first fieldwork student from OT or OTA school.
- Students provide learning opportunity to staff therapists to implement supervisory relationships and skills.
- Students provide a link to various educational institutions to keep up with changes/developments in the field.
- Providing fieldwork experiences is an obligation and responsibility for current practitioners.
- Providing fieldwork experiences assists OT/OTA practitioners with continuing education credits.
- Fieldwork students can provide updates in the literature for evidence based practice that is helpful to the facility/practitioners.
- Fieldwork students can provide more one-on-one time with clients due to lower caseloads and the learning environment.
- Fieldwork students are generally helpful to the overall operation of the facility once oriented and adjusted to population.
- Supervision of students is expected of practitioners.
- Supervision of students is rotated among practitioners on a regular basis.
- Students are not accepted unless a practitioner indicates interest/willingness to take a student.
- Other (Please Explain)
- 6. Describe the training provided for OT staff for effective supervision of students (check all that apply). (Double Click on boxes to check) ACOTE Standards B.7.10, B.10.1, B.10.3, B.10.12, B.10.13, B.10.17, B.10.18, B.10.19, B.10.20, B.10.21
- Supervisory models
- Training on use of FW assessment tools (such as the AOTA Fieldwork Performance Evaluation FWPE, Student Evaluation of Fieldwork

Experience–SEFWE, and the Fieldwork Experience Assessment Tool–FEAT)

Clinical reasoning Discussions and how to teach clinical reasoning to students

Reflective practice

- Comments:
- Please check off any training or resources that fieldwork educators at your site have available to support their role in supervision of students (e.g., print resources, continuing ed. coursework, online materials, workshops, etc.) (Double Click on boxes to check)
- Site Specific Student objectives (**please attach**)
- Training in supervision process (agency in-services)
- Facility's Student manual
- Release time and/or reimbursement for continuing education

AOTA Certificate in Fieldwork Education Program

- Mentoring opportunities (e.g., in 1:1 or Group Format)
- Training or in-service provided by GOTEC, Regional, State or individual Academic Programs

	Use of online resources such as: AOTA (http://www.aota.org/Educate/EdRes/Fieldwork/Supervisor.aspx) GOTEC,	Regional,	State
Ass	sociations, or individual Academic Programs		

Supervision Process (Double Click on boxes to check)									
What is the <u>nature</u> and frequency of supervision meetings: Formal Kinformal Frequency: Kinformal Kinfor									
What is the model of supervision utilized at your site:									
🔀 1:1 Supervision Model 🛛 🗌 Several Students: 1Therapist (Collaborative model) 🔲 Several Therapists: 1 student									
Supervisory Methods to promote reflective practice:									
Journaling	Processing verbally	🔀 Student Self As	sessment/Se	lf Appraisa	al (log/form)				
Written activity analysis	Probing questions	Other: Interdisciplinary group supervision meetings							
Describe record keeping of supervision sessions:									
Co-signed documentation of dail	All informal/formal notes maintained by FW Educator								



## 8. Please describe the process for record keeping supervisory sessions with a student, and the student orientation process to the agency, OT services and the fieldwork experience. (Double Click on boxes to check) ACOTE Standards B.7.10, B.10.1, B.10.3, B.10.12, B.10.13, B.10.17, B.10.18, B.10.19, B.10.20, B.10.21

- Meet with student to review policies, procedures & forms during first week assigned to facility.
- Introduce student to staff and give tour of facility.
- Provide Student Fieldwork Manual of assignments, policies, procedures etc. for the facility.
- Send student to employee orientation, all or parts depending on relevance or as required by facility.
- Review Fieldwork Educator's case load to help student understand populations and interventions being implemented.
- Meet with student at designated time every week to review clients, therapeutic interventions and other questions or concerns.
- Meet with student at various non-scheduled times to review clients, therapeutic interventions and other questions/concerns.
- Wait for student to initiate request to meet with fieldwork educator.
- Supervisory sessions have topic planned for each meeting with student.
- Supervisory sessions do not have topic planned but depend on student's questions/concerns.
- Supervisory sessions address concerns about student performance with possible methods to change/enhance performance.
- Sessions with student are documented by fieldwork educator.
- Sessions with student are documented by student.
- Sessions with students are not documented.
- Sessions with student are documented if problems with performance arise.
- Other:

9. Describe funding and reimbursement sources and their impact on student supervision. (Double Click on boxes to check) ACOTE Standards B.10.3, B.10.5, B.10.7, B.10.14, B.10.17, B.10.19

- Facility receives funding through Medicare.
- Facility receives funding through Medicaid.
- Facility receives funding through private insurance/private pay.
- Facility provides charity care.
- Facility receives funding through other sources grants, tax allocations, etc.

## Impact on Student Supervision:

- Funding source does not affect OT/OTA student supervision.
- Funding source restricts some activities for OT/OTA students. (Circle which group of students affected)
- Funding source prohibits activities provided by OT/OTA students. (Circle which group of students affected)
- Funding source requires fieldwork educator to be on premises to provide supervision of OT/OTA students.
- Funding source requires fieldwork educator to have line-of-sight supervision of OT/OTA students.
- Other (Please Explain)

# **10.** Please include a copy of the FW student objectives, weekly expectations for the Level II FW placement. Please attach to this form or mail to the Academic Fieldwork Coordinator.

Please visit the rehab services website for weekly and site-specific objectives.

## **Occupational Therapy Staff Profile**

- 1. Lynette O'Brien, OTR/L graduated from Indiana University in 1993
- 2. Katie Paulette, MS, OTR/L graduated from Gannon University in 2010
- 3. Alexa Tooker, MOT, OTR/L graduated from UTHSC in 2019
- 4. Shane Wood, MS, OTR/L graduated from Belmont University in 2001
- 5. Buffy Hyman, OTR/L graduated from TWU in 1994
- 6. Scott McLaurin, OT/L graduated from University of AL in 1994
- 7. Caleb Templeton, MS, OTR/L graduated from Belmont in 2005 (practiced as a COTA for 5.5 years)
- 8. Cari Safford, OTR/L graduated from TN State University in 2001



- 9. Julia Jones MS, OTR/L graduated from Eastern KY University in 2000 (practiced as a COTA for 3 years)
- 10. Sarah Anderson, MOT, OTR/L graduated from Eastern KY University in 2018
- 11. Jim Lassiter, OT/L graduated from TN State University in 1994
- 12. Thu Can, OTD/OTR/L graduated from Belmont University in 2018
- 13. Maddeline Harris, OTR/L, C/NDT graduated from University of S. IN in 2013
- 14. Sally Lindsey, COTA/L graduated from Nashville State Tech College in 1987
- 15. Carrie Shotwell, COTA/L graduated from NSCC in 2012
- 16. Jill Stewart, COTA/L graduated from NSCC in 2012
- 17. Julie Woodnorth, OTD/OTR/L graduated from Belmont in 2018
- 18. Catherine Dicicco, OTD/OTR/L graduated from MUSC in 2014
- 19. Gabe Borman, OTR/L graduated from TSU in 2015
- 20. Nicole Kumle, MS, OTR/L graduated from Washington University in 1996
- 21. DeOnna Clark, MOT, OTR/L graduated from Loma Linda University in 2015
- 22. Evan Pendygraft, OTD, OTR/L graduated from Belmont University in 2016
- 23. Domenic Bruzzese, OTD, OTR/L graduated from University of S. California in 2011
- 24. Mary Hogan, OTD, OTR/L graduated from Belmont University in 2018
- 25. Ryan Stornes, MOT, OTR/L, WCC graduated from TSU in 2015
- 26. Molly Beverick, MOT, OTR/L graduated from OSU in 2018
- 27. Keira Kelly MOT, OTR/L graduated from WASU in 2019
- 28. Hannah Munro, OTD, OTR/L graduated from Belmont in 2019
- 29. Abby Nedeljko, OTR/L graduated from Boston University in 2019
- 30. Ereann Kilpatrick, OTR/L graduated from Boston University in 2019
- 31. Elise Foust, COTA/L graduated from Manchester Community College in 2011
- 32. Lin Daffron, COTA/L graduated from NSCC in 2019
- 33. Kayla Vogan, COTA/L graduated from NSCC in 2020
- 34. Katie Douglas, MSOT, OTR/L graduated from Milligan College in 2018
- 35. Meredith Tillery, MSOT, OTR/L graduated from Milligan University in 2019
- 36. Katie McDonnell, OTD, OTR/L graduated from UT Chattanooga in 2018
- 37. Rosie Lewis, MS, OTR/L graduated from Baker College in 2017
- 38. Yvon Swift, OTR/L graduated from Washington University in 2015