

**SCHOOL OF EDUCATION
MILLS COLLEGE**

**CHILD LIFE IN HOSPITAL PROGRAM
FIELD WORK EXPERIENCE
STUDENT HANDBOOK**



2010-2011

Prepared by:
Linda Perez, Ph.D.
Susan R. Marchant, MA, CCLS
Betty Lin, MA, CCLS

TABLE OF CONTENTS

INTRODUCTION AND BACKGROUND STATEMENT	3
CHILD LIFE FIELD EXPERIENCES	5
SEQUENCE OF FIELD EXPERIENCES	5
Mills College Laboratory	5
Hospital Practicum	5
Child Life Hospital Internship	6
Administration Practicum	6
WEEKLY SEMINAR	6
FIELD WORK COORDINATION	7
HOSPITAL INTERNSHIP EXPERIENCE	8
ORIENTATION AND APPLICATION PROCESS	8
Child Life Field Experience Seminar	11
Administration Practicum	12
Observations	12
THE ROLE OF THE HOSPITAL CLINICAL SUPERVISOR	13
THE ROLE OF THE MILLS SUPERVISOR	14
EVALUATION AND GRADING	15
LIABILITY INSURANCE	16
APPENDIX A: FIELD EXPERIENCE AND SEMINAR SYLLABI	17
EDUCATION 173A	18
EDUCATION 273A	21
CASE STUDY FORMAT	25
Portfolio	27
Personal Goal Monitoring	28
EDUCATION 173/273B	30
Personal Goal Monitoring	35
APPENDIX B: ADMINISTRATIVE PRACTICUM SYLLABUS	37
EDUCATION 263	38
Personal Goal Monitoring	40
APPENDIX C: CHILD LIFE COMPETENCIES EVALUATION	42
CHILD LIFE STUDENT INTERN EXPERIENCE	43
EVALUATION SUMMARY	52

INTRODUCTION AND BACKGROUND STATEMENT

Welcome to the Mills Child Life in Hospital Program. As a perspective and field, the child life profession is designed to respond to the developmental, social and emotional needs of children who are experiencing chronic illness and hospitalization, and their families. Its origins are founded in Emma Plank who earned a master's degree in child development at Mills College in 1947. Guided by concern that children's emotional and intellectual development is challenged by separation from their families and other illness-connected trauma, Emma Plank provided the framework for today's child life specialty. The Child Life program at Mills College was formed in 1977 after consultation with Emma Plank and Edna Mitchell. Evelyn Oremland offered the first course in the hospitalized child in 1977 and became the founding director, making Mills College a national leader in the academic preparation of child life specialists at the undergraduate and graduate levels.

Greater awareness in working with culturally diverse children with special needs and their families is of immense importance in the delivery of health care services. Governed by ethics and appreciation for diversity, a multicultural perspective is integrated into the interdisciplinary Child Life curriculum at Mills College. A part of this perspective is the meaning of collaboration and effective communication in which professionals and parents become true partners in meeting the special medical and developmental needs of children served, with understanding and mutual respect.

Fundamental to the design of the Child Life program is the set of principles under which the School of Education operates. This set of six principles informs the processes of professional development across all education programs and, when taken together, shapes a comprehensive program model to guide the core academic activities:

- Education as collegial acts - working with children with special medical and developmental needs requires collaboration and cooperation across a variety of disciplines and expertise.
- Education as acts of inquiry and reflection - working effectively with children with illness requires child life specialists to think about their practice in a reflective inquiry process.
- Learning as a constructivist/developmental process – child life specialists demonstrate their understanding of constructivist/developmental theories as they relate to children with illness.
- Education for the acquisition and construction of subject matter - transforming knowledge and interdisciplinary research findings into practice, and developing interventions to support children with medical and special needs.

- Education as moral acts based on an ethic of care - creating caring contexts to support the emotional needs of children who are experiencing chronic illness and hospitalization, and their families.
- Education as political acts - recognizing the power of education and advocacy in providing access for children with illness to receive psychosocial care in a democratic society.

Consistent with the mission and principles of the Child Life Council, Mills Child Life program values:

- Infants, children, youth, and families
- Play
- Therapeutic relationships
- Communication
- Theoretical foundations of practice
- Professional collaboration
- Professional standards of practice
- Research

Mills Child Life program works in tandem with the Child Life Council to address the following goals:

- To assess responses and needs of children and families to health care;
- To minimize stress and anxiety for the child;
- To prepare children and families for health care experiences;
- To provide essential life experiences;
- To create opportunities which strengthen self-esteem and independence; and
- To communicate effectively with other members of the health care team.

The Child Life Council, established as a nonprofit organization in 1982, is the leading membership association for Child Life Specialists. The Council represents a group of professionals specially trained to help children manage stressful and potentially traumatic experiences. The membership is composed of nearly 4000 child life specialists, child life assistants, university educators and students, as well as hospital administrators and staff, school teachers, therapeutic recreation specialists, and others in related fields.

The Child Life Certification Program is a rigorous examination-based professional certification credential. The requirements for getting certified are based on academic and clinical experiences, and successful completion of the certification examination. For more information please go to www.childlife.org.

CHILD LIFE FIELD EXPERIENCES

During the Mills Child Life program, students participate in a sequence of four structured field experiences commencing in Mills College laboratory school and proceeding to a hospital environment.

SEQUENCE OF FIELD EXPERIENCES

Mills College Laboratory

The sequence begins with the first structured field experience (EDUC 191/291A **Theory and Practice of Early Childhood Education** (core course 0.5-1.5 credit) during the undergraduate student's junior year or graduate student's first year. At this level, students participate in two semesters of field experiences in the Mills College laboratory school to gain knowledge working with infants and toddlers, preschoolers, and school age children. These field experiences require a minimum of 15 hours per week in the laboratory school where students observe and work with children individually and in groups, and with their families in an environment where philosophy is in line with that of the perspective of child life.

Hospital Practicum

During the second field experience (EDUC 191/291B **Theory and Practice of Early Childhood Education**) students are strongly encouraged to participate in a hospital practicum or volunteer in a hospital setting while enrolled in the weekly seminar (EDUC 156/256 **Topics in Health and Exceptional Children**). Under the guidance of Mills staff and child life specialists, students will become familiar with the hospital environment and the developmental and psychosocial impacts of hospitalization on children through observations of child life specialists and of interactions with patients in the playroom. The students will gain an understanding of the ways in which hospitalization affects the family system and examine the general role of child life within the interdisciplinary team.

Students will become familiar with these various facets of the child life profession in the hospital:

- **Intervention:** therapeutic relationship, preparation, medical play, and procedural support.
- **Administrative:** volunteers, in-service trainings, charting, rounds, staff meetings, and programming.

- Through journal writing students will practice how to introduce child life services to children, parents, and other staff, and how to write mock chart notes.

The combined experience of working in the laboratory school, attending classroom seminar, and participating in a hospital practicum or volunteering in a hospital playroom helps students discover differences between key developmental and family issues under these environments.

Child Life Hospital Internship

The year following the completion of EDUC 191/291A/B, **Theory and Practice of Early Childhood Education**, students participate in the third and fourth structured field experiences which consist of two semesters of EDUC 173/273A&B **Field Experience and Seminar in Child Life in Hospital** (core course 0.5-1.0 credit) in a hospital and possibly a community environment. At this level of field experience, students are required to participate for a minimum of 16 hours per week for 15 weeks for two semesters to obtain the 480 hours of clinical hours under the supervision of a certified child life specialist. This requirement is set forth by the Certifying Committee of the Child Life Council for students to qualify for examination to become a certified Child Life specialist. See the section under hospital field experience for a description of the fieldwork objectives.

Administration Practicum

During the third or fourth structured field experience, Child Life graduate students also participate in one semester of administration practicum (EDUC 263 **Administration Practicum** - core course 0.5-1.0 credit) in a field placement where they perform an administrative project on policies and practices in the field of Child Life. Graduate students must participate 8 - 16 hours per week for 15 weeks for one semester only. The range in hours depends on whether students enroll in the course for 0.5 or 1.0 credit. Graduate students may complete their administrative practicum during the time they are completing EDUC 273A/B **Experience and Seminar in Child Life in Hospital** (see appendices). This will depend on meeting the combined hours required for each course as well as any hospital regulations.

WEEKLY SEMINAR

Each fieldwork experience has a seminar that meets once a week. Seminars are designed to encourage students to become reflective professionals through self-evaluation and peer evaluation activities. Seminars are also designed to encourage students to evaluate their

current assignments and to discuss among each other their experiences with diverse populations.

Issues and topics stressed include best practices in working and communicating with children, families, and professionals in a supportive and collaborative manner that emphasizes mutual respect. Through discussions, guided small group discussions, case studies, and presentations from professionals, students reflect upon their understanding of how to work effectively with the family and other professionals concerning child advocacy and clinical/ administrative practices in the field of child life.

FIELD WORK COORDINATION

Mills College and the field placement's clinical supervisors form a team in the education of child life students. Together, the team aims to facilitate students' entrance to the profession of child life and to enhance the quality of psychosocial care and services delivered to children and families who are experiencing chronic illness and hospitalization. The following program structures are designed to coordinate the efforts:

- A three-way conference will occur at the middle and at the end of each placement for the purpose of sharing thoughts about the fieldwork placement, discussing how goals for the experience are being met, talking about responsibilities and assignments, and conducting midterm and final evaluations.
- The Mills faculty will make every effort to enhance the connection between the course work taken at Mills and the fieldwork done at the fieldwork placements. The Mills course work is designed to provide child life students with many basic skills and to encourage a reflective, inquiry orientation toward the profession. Reliance is placed upon the clinical supervisors to help Mills faculty promote that reflective stance.

HOSPITAL INTERNSHIP EXPERIENCE

The Director of Mills Child Life program works with hospital Child Life administrators to identify suitable placements and to make placement contracts with the hospitals. The criteria used to select placements include having a certified child life specialist on staff as required by the Certifying Committee of the Child Life Council, noting the experience of the child life staff and the experiences that should be available to the students. Suitable placements are determined through consultation, on-site observation, and by developing a network of certified professionals in the field of child life committed to collaboration with Mills College in training future child life specialists. Selection of placements will be based on clinical supervisors' academic background, experience and successful performance in the field, knowledge of the program requirements and experiences needed by the student, and willingness to commit time and resources to the student and college. Mills has such collaboration in its field placements.

In some cases, a student may request a particular site outside of the Bay Area or California that can be considered for appropriateness by the Director of Mills Child Life program. When that occurs, the student should first refer to the handout titled "Choosing a Student Internship Site", which is provided by the Child Life Council. The Director of Mills Child Life program then determines whether the out-of-state hospital site meets the Mills program qualifications, such as certification requirements and specialized training that is appropriate to service authorized by certification in child life. All clinical fieldwork placements must provide an outstanding opportunity for students to apply academic knowledge and interdisciplinary research findings within a supervised work setting.

ORIENTATION AND APPLICATION PROCESS

Near the end of the first field experience (EDUC 191/291A **Theory and Practice of Early Childhood Education**), students are oriented in a meeting with the Mills Director of Child Life program to the process of applying for a hospital practicum and the hospital field placement (internship). The latter placement begins **only** after the completion of two semesters of academic preparation and two fieldwork placements at the Mills Laboratory School. Mills has collegial relations with various hospitals in the nearby area including:

- Children's Hospital and Research Center, Oakland, California
- Kaiser Permanente, Hayward, California

- University of California Children’s Hospital, San Francisco, California
- Kaiser Permanente, San Francisco, California
- Kaiser Permanente, Santa Clara, California
- Lucille Packard Children’s Hospital, Stanford, California
- Sutter Memorial Hospital, Sacramento, California
- California Pacific Medical Center, San Francisco, California

Students need to obtain an application packet from the hospital(s) of their choice and to adhere to the deadlines set forth by each one for Summer, Fall, and Spring Internships that are consistent with the Child Life Council:

Internship Session	Application Deadline	Offer Deadline	Acceptance Deadline
Fall	May 5	June 22	June 28
Winter/Spring	Sept . 5	Oct. 22	Oct. 28
Summer	Jan. 5	Feb. 22	Feb. 28

Students may go out of the Bay Area to do an internship as long as the hospital placement meets with the Mills College and Child Life Council’s requirements: supervisors’ academic background and certification in child life, experience of the child life staff, and the experiences available to the student. Students are advised to read the Child Life Directory for a list of various hospitals and to read the Mills Child Life Internship Binder, which has various application forms and a description of the hospitals where Mills has relations and of other outstanding programs in the U.S. Many of the applications may also be found online. The Child Life Directory may be found in the Mills Director of Child Life program’s office.

As part of the orientation process, expectations of student interns are discussed. Throughout the year, student interns are expected to comply with all professional standards of the placements and to adhere to their policies. They should determine appropriate attire for the placement and should observe the holidays of the placement rather than those of the Mills calendar. Fall placements should begin no later than the first week of school and should continue until after final examinations. Spring placements usually begin the first week of school and should continue until approximately the end of May. Summer placements usually begin near the end of May and should continue through the third week of August. Some placements may continue beyond the student’s academic year.

Student interns are expected to be in their placements a minimum of 16 hours per week for 15 weeks for two semesters, and that can include a summer internship. They must

obtain a minimum of 480 hours of clinical supervision with a certified child life specialist as required by the Certifying Committee of the Child Life Council, and attend classes at Mills College. However, the hours can exceed 16 hours per week contingent upon the requirements of each placement.

Student interns are expected to participate in many different experiences, depending on each placement. Experiences may include:

- Child life intern hospital orientation.
- Observing and familiarizing self with the child life department and various roles of the child life staff, routine, and resources.
- Attending and participating in programs (i.e., playroom, teen room, school room, etc.).
- Participating in direct clinical care (i.e., therapeutic play activities in the playroom and at bedside).
- Observing and assisting with medical play in one-to-one basis and in groups.
- Providing procedural support for patients.
- Providing emotional support and education for parents and siblings of pediatric patients.
- Enhancing charting skills: writing objective observations, assessments, and recommendations in patient's medical record.
- Attending patient care conferences as necessary and communicating the psychosocial and emotional needs of the patient to the interdisciplinary team members.
- Completing an individual student project.
- Keeping a daily journal reflecting on child life interventions provided for patients and families, on specialized needs of children in the health care setting, and on personal goal for the internship.
- Supervising volunteers.
- Completing a case study.

Student interns also are expected to participate in as many professional experiences as possible. They should learn how to use effective communication with families, attend staff meetings and in-service trainings at the site, complete course work at Mills during the internship experience, and attend all sessions of the field experience seminar in child life. Should a student need to miss any part of an internship, makeup hours may be required.

Child Life Field Experience Seminar

Child Life student interns must attend the Mills field experience seminar in Child Life in Hospital for two semesters (EDUC 173/273A in Fall and EDUC 173/273B in Spring). These seminars help the students to become reflective professionals and are designed to encourage students to evaluate their current assignments and to discuss among each other their fieldwork experiences with diverse populations in the hospital setting. Through discussions, guided small group discussions, case studies, and class presentations, students will reflect upon their understanding of how to work more effectively with children and families served in the hospital, as well as with other health care professionals.

As part of the course requirements, students develop a portfolio to document the various activities in which they participate in during each field experience. The portfolio is a vehicle for assisting the student internship experience and for facilitating self-evaluation and appraisal of professional development. It serves to structure the field experience for the student, the placement, and Mills supervisor.

During the first session of the field experience seminar, student portfolio information and materials will be distributed. At that time, the student intern will structure two goals to work towards during the field experience. These goals will be discussed with the Mills Supervisor and should be taken into consideration at the placement. The Mills faculty will evaluate the portfolio during the field experience seminar, will discuss the students' professional development as portrayed in the portfolio, and will assist the student intern in reflecting on and enhancing their performance as child life specialists. See Appendix A for a description of the course syllabi and the portfolio requirements for EDUC 173/ 273A and EDUC 173/273B **Field Experience and Seminar in Child Life in Hospital**.

The following is a list of the major components of the portfolio:

- Reflection Journal
- Personal Goal Monitoring
- Field Placement Project
- Administrative Project (if also enrolled in EDUC 263)
- Chart Notes
- Resume
- For additional portfolio components, see Appendix A

Administration Practicum

Prior to completing the Child Life curriculum, graduate students in child life are required to participate in one semester of Administration Practicum (EDUC 263 Fall) in a field placement where they perform an administrative project on policies and practices in the field of child life. Students are permitted to complete the Administration Practicum at the site where they are completing one of their hospital field experiences as long as they meet the combined hours required for each course. See Appendix B for a description of the course syllabus and the portfolio requirements for EDUC 263 Administration Practicum.

Observations

Student interns in child life need to be exposed to many different environments where services are being provided for children who are experiencing chronic illness and hospitalization, and for their families. Toward this end, student interns are expected to make two observations in other hospitals or medically related sites each semester. Scheduling these observation times should be negotiated between the student intern and the site.

THE ROLE OF THE HOSPITAL CLINICAL SUPERVISOR

The relationship between hospital clinical supervisor and student intern is very important because it models and sets the tone for the learning process. This relationship must be based on open and sensitive communication. It is the responsibility of the clinical supervisor to demonstrate the attitudes, knowledge, and skills that constitute thoughtful, effective, and caring professional practice. Clinical supervisors share their knowledge, visions, and enthusiasm with student interns. They observe the student interns in action and provide written feedback on the evaluation forms. Clinical supervisors build the confidence of child life interns, welcome them to placements, and provide information regarding placement policies.

Student interns can expect clinical supervisors to provide academic and professional guidance consistent with best practice, to assist in planning intervention strategies, and to observe and debrief their work in a constructive manner during regularly scheduled meetings. Clinical supervisors also share their expertise in other positive ways such as helping students to participate in developmentally-based opportunities for play activities, to assess patients and family needs, to build relationships and provide emotional support for patients and parents, and to establish a placement environment that facilitates learning. Clinical supervisors will also engage student interns in reflective conversations about practice and will provide access to child life documentation of goals and objectives in medical charts.

Through advisory and regularly scheduled meetings with the Mills Director of Child Life program and Child Life hospital administrators and supervisors, the clinical supervisors will be oriented to the purposes, procedures, and internship goals of the Mills Child Life program and vice versa.

THE ROLE OF THE MILLS SUPERVISOR

The Mills Supervisor is the third member of the "team" along with the student intern and clinical supervisor. Supervision should be carried out in a manner that promotes thoughtful planning, execution, and evaluation of the learning process by the student intern in a positive, supportive climate. The Mills supervisor has less responsibility for introducing the student intern to the placement, but has more responsibility for facilitating the association between the fieldwork and Mills course work. Mills supervisors need to remind and to encourage student interns to apply what they are learning in their courses to what they are seeing and doing in the field and vice versa. The specific duties of the Mills supervisors include the following:

- Coordinate a three-way meeting between the clinical supervisor, student intern, and the Mills supervisor at least twice during a placement (midterm and final evaluation).
- Meet with all of the student interns as a group on a weekly basis in the student teaching seminar (EDUC 273A in Fall; EDUC 273B in Spring).
- Read student journals and provide feedback.
- Determine and record final grades for the field assignment in consultation with the clinical supervisor.
- Act as a liaison between the field placement/internship sites and the Mills College Child Life program.

EVALUATION AND GRADING

The evaluation of a student's growth in the hospital field assignment is an on-going process. Formative evaluation should occur on a regular basis during meetings or phone conversations between the Mills supervisor and clinical supervisors. At the end of each placement, a more summative evaluation will occur. Its main purpose is to provide feedback to the students to assist them in their life-long development as child life specialists. The Mills supervisor will use this information in the formulation of a final grade for the semester of student fieldwork/internship assignment. Once the student intern has had the opportunity to read the evaluation, the Mills supervisor will place it in the student's academic file. The student should retain a copy to help identify and to self-evaluate ongoing goals and experiences.

The formative evaluation of the students' fieldwork performance represents one of the ways in which students' development as child life specialists is assessed throughout the program. Other forms of assessments include:

- (a) Analysis of the students' changing perspective on child life as it evolves in their journal writing about their field experiences;
- (b) Mills supervisor progress evaluation through visits and consultations with the clinical supervisor;
- (c) Evaluation of college course work taken in conjunction with the field experience; and
- (d) The completion of all portfolio requirements.

In the event that a student intern is not making satisfactory progress in a field placement, a formal system of consultation and progress review will be activated with the Mills supervisor, the clinical supervisor, and the student intern. If the internship site is not meeting the student's needs, then a decision will be made on how to improve the situation. In the case of unsatisfactory progress, this review becomes more intense and involves a wider circle of Mills faculty and the placement representatives. Please review the competencies and the sample evaluation tool listed in *Appendix C* that students are expected to practice in their fieldwork.

LIABILITY INSURANCE

Some of the hospitals in the nearby area that Mills has collegial relations (see page 7 of the handbook) provide student interns with liability insurance. In the case that a student intern is accepted to a hospital which does not provide liability insurance, the student can apply with the American Psychological Association Insurance Trust. The APAIT website application has a very streamlined process for obtaining liability insurance premium at a reasonable cost (www.apait.org).

APPENDIX A

FIELD EXPERIENCE AND SEMINAR SYLLABI

For comprehensive versions of course syllabi, please contact the instructors.

EDUCATION 173A FIELD EXPERIENCE AND SEMINAR

Instructor: Susan R. Marchant, MA, CCLS

Telephone: 510-430-2328

E-Mail: smarchan@mills.edu

Course Description:

Education seminar and workshop for child life students who are participating in field work/internship settings. This course will concentrate on clinical observations and experiences in a health care or health-related setting with children and families. Activities will include class discussions, self reflection and evaluation, written and oral reports and guest speakers.

GOALS: All goals are listed below. Please note that with each goal there are specific and measurable criteria or student learning outcomes which students are expected to do, know or develop by the end of the course.

Course Goals are:

1. Engage students in child and family health related clinical discussions through peer interchange and evaluation (Practice)
 - a) Students will write up and distribute clinical dilemmas arising for children and families in healthcare environments to discuss during class activities.

2. Engage students in self evaluation activities (Practice)
 - a) Students will apply self evaluation activities in their class exercises.

3. Engage students in reflective professional practices (Practice)
 - a) Students will identify reflective professional activities in class discussions.

Supervision:

Students are supervised by placement staff at their field work/internship site. Additional supervision is provided via the seminar, individual conferences, and by phone or email.

Grading: see attached rubrics for each individual assignments and for the course; points for the Internship Evaluation will be based on the placement/internship evaluation by the onsite clinical supervisor and the academic instructor. If the student is not currently in an internship, a prior internship will be utilized.

The course grade will be based on the following:

1. Organization of Assignments;
2. Integration of Course Material;
3. Reflective Analysis;
4. Critical Thinking;
5. Quality of Written and Oral Assignments;
6. Professionalism;
7. Attendance and Participation
8. Internship Evaluation

Course Policies:

1. **Policy on Incompletes:** Students qualify for incomplete grades only if they have completed 2/3 of the total coursework and are responding to unforeseen circumstances.
2. **Policy on Attendance:** Students are expected to attend all classes except for excused absences or emergencies. More than 2 unexcused absences will affect the final grade. Excused absences may include religious holidays and medical necessities. Students are expected to notify the instructor prior to any planned absence. Tardiness, lack of participation and inappropriate behaviors during class time will also impact the final grade.
3. **Policy on Academic Integrity:** Students shall honestly prepare assignments and submit them at the time and in the manner specified by the instructor. The content of all submitted assignments is assumed to represent the student's own work unless otherwise specified (e.g., group projects). For purposes of the Mills College Honor Code, plagiarism is defined as intentionally or knowingly using someone else's ideas, words and/or thoughts without properly crediting the source. Violation of the Honor Code may result in additional assignments, a lower grade and/or further sanctions.

4. Policy on Reasonable Accommodations for People with Disabilities:

Every effort will be provided to make this class universally accessible. Though “reasonable accommodation” is the legal right of people with disabilities, this course is designed to be universally accessible for students regardless of disability or other individual categorization. Students with n needs for alternate learning materials or strategies should contact SSD in the Cowell building by calling X2130 and informing this instructor in order for access to be arranged adequately and promptly.

Official Documents of the Child Life Council, Child Life Council, 2002

Oremland, Evelyn K. Ph.D., **Protecting the Emotional Development of the Ill Child...The Essence of the Child Life Profession**, Psychosocial Press, 2000

Thompson, Richard H., Ph.D. **The Handbook of Child Life....A Guide for Pediatric Psychosocial Care**, Charles C. Thomas, Publisher, 2008

Special Assignments: (see attached documents for detailed information and due dates)

Occasional handouts may be distributed for review prior to the following class.

All Students:

1. 2 Reflection Papers (written and oral presentations)
2. Case Study (written and oral presentations)
3. Internship experience as appropriate

Graduate Students only:

1. Written analysis of the benefits of debating clinical ethical issues

For a comprehensive version of the syllabus, please contact the instructor.

EDUCATION 273A FIELD EXPERIENCE AND SEMINAR

Instructor: Susan R. Marchant, MA, CCLS
Telephone: 510-430-2328= School Office
E-Mail: smarchan@mills.edu

Course Description:

Education seminar and workshop for child life students who are participating in field work/internship settings. This course will concentrate on clinical observations and experiences in a health care or health-related setting with children and families. Activities will include class discussions, self reflection and evaluation, written and oral reports and guest speakers.

GOALS: All goals are listed below. Please note that under each goal there are specific and measurable criteria or student learning outcomes which students are expected to do, know or develop by the end of the course.

Mission Goals are:

1. Students will learn to think critically (Practice)
 - a) Students will present child/family health care experiences and engage in critical review acknowledging multiple perspectives.

2. Students will develop as leaders and innovators in their chosen endeavors (Practice)
 - a) Students will engage with other students in discussing and demonstrating criteria required to become effective leaders in their chosen fields of practice.
 - b) Students will identify how to present a new idea to senior leaders in their chosen practices.

Program Goals are:

1. Provide students with many different theoretical perspectives and scientific and practical knowledge to understand and support human development and learning (Master)
 - a) Students will include multiple theoretical perspectives with regard to child and family healthcare experiences in their class exercises.

2. Prepare reflective and critical thinkers who examine issues about the development of infants and young children and their relationships in various contexts: school, hospital, family, community, and within understanding of culture (Master)
 - a) Students will analyze how cultural mores impact a patient/family response to the healthcare environment.
3. Prepare students to work as part of a team and to develop collegial relationships with fellow students and faculty (Master)
 - a. Through clinical class discussions, students will analyze the benefits of working collaboratively with colleagues and faculty members.
4. Prepare students to interact with children with medical needs and their families in a family-centered manner guided by theories of human growth and development (Master)
 - a) Students will demonstrate familiarity with the principles of family centered care at all stages of human development with respect to medical needs in their class assignments.
5. Prepare students to participate as a member of a multidisciplinary team (Master)
 - a) Students will participate in collaboration with multidisciplinary team members in a healthcare environment.

Course Goals are:

1. Engage students in child and family health related clinical discussions through peer interchange and evaluation (Practice)
 - b) Students will be able to formulate sound clinical interventions through peer interchange and evaluation.
2. Engage students in self evaluation activities (Practice)
 - b) Students will be able to constructively critique their own evaluation practices.
3. Engage students in reflective professional practices (Practice)
 - b) Students will reflect on their work with patients and families in their oral and written discussions.

Supervision:

Students are supervised by placement staff at their field work/internship site. Additional supervision is provided via the seminar, individual conferences, and by phone or email.

Grading: see attached rubrics for each individual assignment as well as for the course; points for the Internship Evaluation will be based on the placement/internship evaluation(s) by the onsite clinical supervisor and the academic instructor. If a student is not currently in an internship, prior internship information will be utilized.

The course grade will be based on the following:

1. Organization of Assignments;
2. Integration of Course Material;
3. Reflective Analysis;
4. Critical Thinking;
5. Quality of Written and Oral Assignments;
6. Professionalism;
7. Attendance and Participation
8. Internship Evaluation

Course Policies:

1. **Policy on Incompletes:** Students qualify for incomplete grades only if they have completed 2/3 of the total coursework and are responding to unforeseen circumstances.
2. **Policy on Attendance:** Students are expected to attend all classes except for excused absences or emergencies. More than 2 unexcused absences will affect the final grade. Excused absences may include religious holidays and medical necessities. Students are expected to notify the instructor prior to any planned absence. Tardiness, lack of participation and inappropriate behaviors during class time will also impact the final grade.
3. **Policy on Academic Integrity:** Students shall honestly prepare assignments and submit them at the time and in the manner specified by the instructor. The content of all submitted assignments is assumed to represent the student's own work unless otherwise specified (e.g., group projects). For purposes of the Mills College Honor Code, plagiarism is defined as intentionally or knowingly using someone else's ideas, words and/or thoughts without properly crediting the source. Violation of the Honor Code may result in additional assignments, a lower grade and/or further sanctions.

4. **Policy on Reasonable Accommodations for People with Disabilities:**

Every effort will be provided to make this class universally accessible. Though “reasonable accommodation” is the legal right of people with disabilities, this course is designed to be universally accessible for students regardless of disability or other individual categorization. Students with n needs for alternate learning materials or strategies should contact SSD in the Cowell building by calling X2130 and informing this instructor in order for access to be arranged adequately and promptly.

Recommended Readings:

Official Documents of the Child Life Council, Child Life Council, 2002

Oremland, Evelyn K. Ph.D., **Protecting the Emotional Development of the Ill Child...The Essence of the Child Life Profession,** Psychosocial Press, Madison, Connecticut, 1998

Thompson, Richard H. Ph.D. **The Handbook of Child Life....A Guide for Pediatric Psychosocial Care,** Charles C. Thomas, Publisher, 2008

Special Assignments: (see attached documents for detailed information and due dates)

There may be occasional handouts to review in preparation for the following class.

All Students:

4. 2 Reflection Papers (written and oral presentations)
5. Case Study (written and oral presentations)
6. Internship experience as appropriate

Graduate Students only:

2. Written analysis of how you would approach boundary issues in your clinical practice.

For a comprehensive version of the entire syllabus, please contact the instructor.

CASE STUDY FORMAT FOR STUDENT PRESENTATION/DISCUSSION

**EDUCATION 173A/273A
MILLS COLLEGE**

APPROACH:

1. 4-5 pages in length and double-spaced;
2. Draw from child development theorists, and your professional journal entries as appropriate;
3. Share challenges you faced;
4. Allow 15 minutes for presentation; 3-5 minutes for discussion;
5. Prepare in writing and distribute to class utilizing the following case study format

FORMAT:

1. History

A. Patient information

1. age, gender, ethnicity
2. diagnosis/presenting medical history
3. brief description of pertinent medical issues

B. Family information

1. members
2. socio-cultural factors
3. family stressors

2. Child Life Care Plan

A. Physical needs

- 1. child life assessments**
 - a) developmental issues
 - b) subjective data – patient and family statements
 - c) objective data – child life observations
(occurs throughout process)
- 2. child life goals**
- 3. child life interventions and why**

4. evaluation of interventions

- a) what worked
- b) what didn't work

B. Social and emotional needs

1. child life assessments

- a) developmental issues
- b) subjective data – patient and family statements
- c) objective data – child life observations
(occurs throughout process)

2. child life goals

3. child life interventions and why

4. evaluation of interventions

- a) what worked
- b) what didn't work

C. Cognitive needs

1. child life assessments

- a) developmental issues
- b) subjective data – patient and family statements
- c) objective data – child life observations
(occurs throughout the process)

2. child life goals

3. child life interventions and why

4. evaluation of interventions

- a) what worked
- b) what didn't work

3. Conclusion

A. summary of patient's case

B. concerns for the future

C. personal issues faced by the student

D. reflect on what worked and what didn't work- what might you have done differently?

Portfolio

The portfolio will assist your fieldwork experience and facilitate self-evaluation.

Reflection Journal

Students are to keep a journal of their interactions in the field. Recordings should take place each week. The journal is a reflective tool to help you gain insights into your clinical practice; it is to be shared with your hospital supervisor and included in the portfolio for your own keeping.

Fieldwork/internship Project

Some field placements require a student project that benefits the placement and enhances the student's field experience. Students will present their ideas for peer evaluation in seminar and submit a brief description of the completed activity and a critique of that work, i.e., what went well and what would you change.

Administrative Practicum

Students in the administrative practicum will develop an additional administrative project within the context of the field placement that is pursued through discussion with the field and university supervisors. Students will submit a portfolio of the experience. It can be included in the same binder as this portfolio.

Charting

Students will observe children playing in a playroom setting and develop two chart **SOAP** notes about the play activity.

Case Study

As outlined above.

Resumes

Graduating students are required to complete a resume.

Personal Goal Monitoring

During the fieldwork placement, students will select two goals to work on. These goals should be listed and monitored on the Personal Goal Monitoring Sheet, and included in the portfolio.

Personal Goal Monitoring

Student Name: _____ Field Supervisor: _____

Goal #1: _____

<u>Month</u>	<u>Progress Made</u>	<u>Next Steps</u>
FIRST		
SECOND		
THIRD		

Personal Goal Monitoring

Student Name: _____ Field Supervisor: _____

Goal #1: _____

<u>Month</u>	<u>Progress Made</u>	<u>Next Steps</u>
FIRST		
SECOND		
THIRD		

EDUCATION 173/273B FIELD EXPERIENCE IN CHILD LIFE

Instructor: Linda Perez, Ph.D.
Telephone: 430-2328; email: lperez@mills.edu

Course Description:

Education seminar and workshop for child life students who are participating in field work. This course concentrates on clinical observations and interventions in a health care setting with chronically ill children.

Students earn .5 credits for 8 hours of field work per week and 1 credit for 16 hours or more per week. Make-up sessions are arranged with the field supervisor in the case of absences.

Knowledge Base Theme:

Preparing reflective and innovative professionals who ensure the development of diverse populations within a dynamic context.

Mission Goals and Measured Outcomes

This course introduces students to and allows students to practice the following Mission Goals as set forth by the School of Education. By the end of this course, the students should be able to demonstrate their achievement toward the goals through a set of Measurable Criteria established by this course:

Goal #1 Students will learn to think critically:

- a. Students will be able to articulate a clear theoretical framework that relates to an hypothesis.

Goal #2 Students will develop as leaders ad innovators in their chosen endeavors:

- a. Students will be able to demonstrate various forms of inquiry and self-reflection.

Program Goals and Measured Outcomes

This course prepares students to practice the following Programs Goals as set forth by their majors. By the end of this course, the students should be able to demonstrate their achievement toward the goals through a set of Measurable Criteria set forth by this course:

Child Life Health

- Goal #1 Provide students with many different theoretical perspectives and scientific and practical knowledge to understand and support human development and learning:*
- a. All students will apply medical concepts in their work with children and families in the hospital.
- Goal #2 Prepare reflective and critical thinkers who examine issues about the development of infants and young children and their relationships in various contexts: school, hospital, family, community, and with an understanding of culture:*
- a. All students will through self-reflection gain an understanding of developmental issues with an understanding of family dynamics.
- Goal #3 Prepare students to work as a part of a team and to develop collegial relationships with fellow students and faculty:*
- a. All students will regularly engage in collaborative group activities in their fieldwork.
- Goal #4 Prepare students to interact with children with medical needs and their families in a family-centered manner guided by theories of human growth and development:*
- a. All students will be able to demonstrate practice with an understanding of family dynamics in their fieldwork.
- Goal #5 Prepare students to participate as a member of a multidisciplinary team.*
- a. All students will through examination be able to identify their own role on a multidisciplinary team.

Course Policies

Students with disabilities who believe they may need accommodations in this class are encouraged to contact SSD in the Cowell Building as soon as possible to better ensure that such accommodations are implemented in a timely manner.

Students are expected to contact professor if they miss class. Every two unexcused absences will lower course grade. Unexcused tardiness will lower course grade

Late papers will deduct points from your grade. Email papers are **not** accepted.

Students shall honestly prepare assignments and take examinations and submit them at the time and in the manner specified by the instructor. The content of all submitted examinations and assignments is assumed to represent the student's own work unless otherwise specified (e.g., group projects).

Plagiarism is a serious breach of academic trust. For purposes of the Mills College Honor Code, plagiarism is defined as intentionally or knowingly using someone else's ideas,

words, and/or thoughts without properly crediting the source. All work for which a source is not cited is presumed to be that of the writer.

If the Academic Integrity Standards described above are violated, the instructor will decide on an appropriate response that may include the assignment of extra work, lowering grades on a particular assignment, failure of the course, and/or the report of the incident to the Provost and Dean of the Faculty for further sanction.

Students qualify for incomplete grades only if they have completed 2/3 of the total coursework and are responding to unforeseen circumstances. In this class, students must complete all work except the final exam to qualify for consideration of an incomplete. Students who have not completed substantial coursework should not assume that they will be given an incomplete at the end of the semester.

Course Objectives (Knowledge base and practicum experience)

Students will develop a portfolio that documents their fieldwork experience

Supervision

Students are supervised by placement staff, a Mills supervisor, and in seminar.

Grading

Course grade is based on evaluations of the fieldwork participation, portfolio, and attendance and participation in seminar.

Assignments:

- **Portfolio consists of:**

Reflection Journal

Students keep a journal of their interactions in the field. Recordings take place *each week*. The journal is a reflective tool to help students gain insight into their clinical practice. Child life students share their journal entries with the hospital supervisor. Infant Mental Health students share their journal entries with the Mills supervisor. The journal entries are placed in the portfolio.

Fieldwork/internship Project

Students are required to do a project that benefits the placement and that enhances the field experience. Students present their ideas for peer evaluation in seminar and submit a descriptive critique of the completed activity in the portfolio.

Case Study (The outline is presented on page

A 2-page reflection paper that discusses parents' first reaction to the hospital environment, going from the parking lot to the pediatric ward.

A paper that introduces yourself and child life services to families

A critique of at least one children's book that assists children through loss and grief. See recommended readings

Recommended Readings to Help Grieving Parents

Finkbeiner, A. (1998) After the death of a child: Living with loss through the years

*Lendrum, S. & Syme, G. (Second edition). Gift of tears: A practical approach to loss and bereavement in counseling and psychotherapy. Brunner-Routledge

Recommended Readings to Help Grieving Children and Adolescents

*Markell K. & Markell, M. (2008). The children who lived.

Rowling, J.K. The Harry Potter books.

White, E.B. (1952). Charlotte's Web

Burnett, F. The Secret Garden

Lieberman, A., Compton, N., Van Horn, P. & Ippen, C. (2003). Losing a parent to death in the early years.

Recommended Readings for Vicarious Trauma

*Saakvitne, K. & Pearlman, L. (1996). Transforming the pain: A workbook on vicarious traumatization

Katz, R. & Johnson, T. (2006) When professionals weep: Emotional and countertransference responses in end-of-life care

*Highly recommended for course but you can draw on pass readings that support our class schedule

The recommended readings are available from Amazon Books and are fairly inexpensive.

Class Schedule

- Introduction
- Building Our Skills in Working with Families
- Helping Families and Children Through the Bereavement Process
- Vicarious Trauma & Self Care
- Case Studies/Portfolios

Class meeting times will focus on discussion and exercises in relation to applying theory to our hospital and fieldwork practice.

Personal Goal Monitoring

Student Name: _____ Field Supervisor: _____

Goal #1: _____

<u>Month</u>	<u>Progress Made</u>	<u>Next Steps</u>
FIRST		
SECOND		
THIRD		

Personal Goal Monitoring

Student Name: _____ Field Supervisor: _____

Goal #1: _____

<u>Month</u>	<u>Progress Made</u>	<u>Next Steps</u>
FIRST		
SECOND		
THIRD		

APPENDIX B

ADMINISTRATIVE PRACTICUM SYLLABUS

(For a comprehensive version of the syllabus, please contact the instructor.)

EDUCATION 263 ADMINISTRATIVE PRACTICUM

Instructor: Linda M. Perez, Ph.D.

Telephone: 510-430-2328; email: lperez@mills.edu

Course Description:

This course is for students who are participating in an administrative field experience. Students earn 0.5 credits for 8 hours of field experience per week and 1.0 credit for 16 hours per week.

Knowledge Base Theme:

Preparing reflective and innovative professionals in the area of administration in the field of early childhood education, including special education and child life in hospitals.

Mission and Program Student Goals

- Develop as leaders and innovators in the field
- Take responsibility for their own learning
- Develop collegial relationships with students and faculty
- Self-reflect and critically examine issues about the development of infants and children and their relationships in various contexts: school, hospital, family, community, and with an understanding of culture
- Interact with children and families in a family-focused manner guided by theories of human growth and development

Criteria for Measuring Learning Outcomes

- develop an administrative project in a special interest area that fosters children's development
- develop a portfolio that documents the administrative experience
- self-evaluate performance in relation to self-selected goal areas
- self-reflective journal of progress

Course Policies

Students with disabilities who believe they may need accommodations in this class are encouraged to contact SSD in the Cowell Building as soon as possible to better ensure that such accommodations are implemented in a timely manner.

Students are expected to contact professor if they miss class. Every two unexcused absences will lower course grade. Unexcused tardiness will lower course grade

Late papers will deduct points from your grade. Email papers are **not** accepted.

Students shall honestly prepare assignments and take examinations and submit them at the time and in the manner specified by the instructor. The content of all submitted examinations and assignments is assumed to represent the student's own work unless otherwise specified (e.g., group projects).

Plagiarism is a serious breach of academic trust. For purposes of the Mills College Honor Code, plagiarism is defined as intentionally or knowingly using someone else's ideas, words, and/or thoughts without properly crediting the source. All work for which a source is not cited is presumed to be that of the writer.

If the Academic Integrity Standards described above are violated, the instructor will decide on an appropriate response that may include the assignment of extra work, lowering grades on a particular assignment, failure of the course, and/or the report of the incident to the Provost and Dean of the Faculty for further sanction.

Course Requirements and Grading Standards

Ed. 263 meets independently with the Professor and requires a minimum of 8 to 16 hours of outside work (reading, written assignments, etc. per week).

Policy on Incomplete Grade

Students qualify for incomplete grades only if they have completed 2/3 of the total coursework and are responding to unforeseen circumstances. In this class, students must complete all work except the final exam to qualify for consideration of an incomplete. Students who have not completed substantial coursework should not assume that they will be given an incomplete at the end of the semester.

Personal Goal Monitoring

Student Name: _____ Field Supervisor: _____

Goal #1: _____

<u>Month</u>	<u>Progress Made</u>	<u>Next Steps</u>
FIRST		
SECOND		
THIRD		

Personal Goal Monitoring

Student Name: _____ **Field Supervisor:** _____

Goal #1: _____

Month

Progress Made

Next Steps

FIRST

SECOND

THIRD

APPENDIX C

CHILD LIFE COMPETENCIES EVALUATION

***Different hospitals may have different evaluation systems. Included is a Mills College sample evaluation. Your final internship evaluation tool will depend on the program you are placed with.*

CHILD LIFE STUDENT INTERN EXPERIENCE

This competency-based evaluation tool is based upon the Child Life Council Competencies

Student Intern _____

Internship

Location _____

Clinical Supervisor _____

Dates _____

This form allows students with their supervisors, to quantify and describe their hospital internship experiences. The objectives are to help students identify and self-evaluate goals, provide an ongoing record of experiences, and evaluate competencies.

Indicate the number that best describes the student’s internship experience.

- 1 = No experience
- 2 = Observed only
- 3 = Demonstrated to supervisor
- 4 = Competent

1.0 Observe and interact with patients and families in a family-centered manner using theories of human growth and development

Objectives

Match interactions and activities to the developmental level and emotional state:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Use therapeutic/expressive play with:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Develop communication skills and use patience and sensitivity in interactions with:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4
- ❖ Parents 1 2 3 4
- ❖ Siblings 1 2 3 4

Objectives

Seek the involvement of families in meeting the Child Life intern’s goals

- ❖ Educate parents of child life goals 1 2 3 4
- ❖ Interact positively with families 1 2 3 4
- ❖ Develop working relations with families 1 2 3 4
- ❖ Support siblings 1 2 3 4
- ❖ Facilitate support groups 1 2 3 4
- ❖ Show awareness and sensitivity to cultural, ethnic and religious differences 1 2 3 4

COMMENTS:

Supervisor

Intern

2.0 Assess patients in a culturally competent and developmentally appropriate way and link assessment information to individual interventions

Objectives

Use assessment techniques to determine developmental and emotional states:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Use developmentally appropriate play activities in assessing psychosocial needs:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Link assessment information with intervention plans:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Link assessment information with child life goals:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

COMMENTS:

Supervisor

Intern

3.0 Provide therapeutic and safe environment

Objectives

- ❖ Assess the environment for safety and health hazards and preventive measures 1 2 3 4
- ❖ Follow infection control policies 1 2 3 4
- ❖ Maintain confidentiality and privacy 1 2 3 4

Objectives

Plan, implement and evaluate activities for a therapeutic environment for:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Plan, implement and evaluate individual interventions:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

Plan, implement and evaluate group interventions:

- ❖ Infants/Toddlers 1 2 3 4
- ❖ Preschool children 1 2 3 4
- ❖ School-age children 1 2 3 4
- ❖ Adolescents 1 2 3 4

Objectives

- ❖ Assist patients and families in coping with the stress of hospitalization, illness, and/or death 1 2 3 4
- ❖ Use appropriate listening skills 1 2 3 4
- ❖ Know the impact of stress and trauma on early brain development and behavior 1 2 3 4
- ❖ Know and provide techniques to aid in coping 1 2 3 4

COMMENTS:

Supervisor

Intern

4.0 Participate as a member of the health care team and with other health care professionals

Objectives

Communicate child life theory and practice relative to the patient’s needs at:

- ❖ Interdisciplinary rounds 1 2 3 4
- ❖ Staff meetings 1 2 3 4
- ❖ Case presentations 1 2 3 4
- ❖ Patient care conferences 1 2 3 4

Objectives

- ❖ Coordinate the patient’s psychosocial needs with the treatments of other disciplines 1 2 3 4
- ❖ Integrate multi-disciplinary goals into the program 1 2 3 4
- ❖ Make referrals to other disciplines 1 2 3 4
- ❖ Able to accept and give professional critiques 1 2 3 4

Objectives

- ❖ Complete and write accurate assessments 1 2 3 4
- ❖ Write chart notes accurately in the journal 1 2 3 4
- ❖ Write chart notes in the medical records 1 2 3 4
- ❖ Supervise volunteers and provide ongoing feedback in a constructive way 1 2 3 4

COMMENTS:

Supervisor

Intern

5.0 Ability to observe and carry out medical preparations

Objectives

- ❖ Observe procedures and surgeries 1 2 3 4
- ❖ Participate in pre-admission programs 1 2 3 4
- ❖ Research and carry out preparation for health care experiences 1 2 3 4
- ❖ Participate in post-procedural interactions 1 2 3 4

COMMENTS:

Supervisor

Intern

6.0 Participate in administration of child life programs

Objectives

- ❖ Review and set priorities using patient census 1 2 3 4
- ❖ Develop basic understanding of the program budget 1 2 3 4
- ❖ Review, evaluate and use quality assurance measures 1 2 3 4
- ❖ Review, use and add to a resource library 1 2 3 4
- ❖ Participate in various inpatient/outpatient services 1 2 3 4
- ❖ Participate in non-hospital, health related services 1 2 3 4
- ❖ Prepare an administrative project 1 2 3 4

COMMENTS:

Supervisor

Intern

7.0 Demonstrate knowledge and professional growth during field work experience

Objectives

Demonstrate knowledge of:

- ❖ Medical terms 1 2 3 4
- ❖ Diagnoses 1 2 3 4
- ❖ Treatment protocols 1 2 3 4
- ❖ Child life and child development literature and research based evidence 1 2 3 4
- ❖ Hospital school program 1 2 3 4
- ❖ HIPPA Regulations: Patient Confidentiality 1 2 3 4
- ❖ Pediatric end-of-life care 1 2 3 4

Objectives

Demonstrate professional growth:

- ❖ Transition to professional worker 1 2 3 4
- ❖ Attend workshops and conferences 1 2 3 4
- ❖ Participate in professional associations 1 2 3 4
- ❖ Have skills and knowledge for the certification exam; develop leadership, advocacy and research skills 1 2 3 4

COMMENTS:

Supervisor

Intern

INTERNSHIP I

Personal Qualities	Outstanding	Good	More effort
Ability to self-evaluate			
Enthusiastic			
Confident			
Creative			
Flexible			
Dependable			
Punctual			
Shows initiative			
Sense of humor			
Shows leadership			
Shows good judgment			
Effective use of time			
Responds well to feedback			

COMMENTS:

Supervisor

Intern

EVALUATION SUMMARY

Areas of greatest strength

Areas of greatest growth

Areas for future growth

Child Life Specialist _____ Date _____

Student Intern _____ Date _____

College Advisor _____ Date _____