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SUPERVISION CONFIRMATION FORM

Provisional Member - Supervision Plan

This form must be signed by the applicant, the supervising therapist, and the employer, and returned to COTM before the registration process can be completed and before you are able to start work. Completion of this form does not imply registration with COTM is complete.

Applicant's Information:

I, _____ [name of applicant] understand that I must practise with supervision until I have met all of COTM's requirements for practising registration. I understand that my supervisor is required to communicate with COTM regarding any practice concerns that arise during my supervised practice.

Signature: _____

Supervising Therapist's Information:

I, _____ [name of supervisor] confirm that I will be providing Level ____ supervision for _____ [name of applicant] commensurate with the applicant's skills and experience. I confirm that supervision will be provided through the applicant's work period while registered with COTM as a provisional registrant.

Signature: _____ COTM registration number: _____

Employer Information:

Name: _____ Title: _____

Signature: _____

Facility: _____

(Address and Telephone Number)

Start Date of employment or supervised practise: _____

Level 1 supervision is required for OT's who:

- 1) have recently graduated from a Canadian University and have not yet written the CAOT certification exam or are waiting for the exam results.
- 2) are completing academic upgrading. COTM may require an applicant do academic course work if an academic equivalency review finds that the applicants educational program did not provide academic preparation comparable to the education provided at Canadian universities and the applicant is not otherwise able to show equivalent skills.

Level 2 supervision is required for internationally educated OT's who have not yet written the CAOT certification exam or are waiting for the results of the examination.

Level 3 supervision is required for OT's who:

- 1) do not have the required number of practice hours to be considered current. In this case, the applicant must complete a period of supervised practice for re-entry.
- 2) have completed a period of supervised practice for re-entry but have not yet written the CAOT examination or are waiting for the results of the exam.
- 3) have the minimum English language skills required, but do not yet have the language skills needed for the Practising Register. In this case, supervision is needed until the applicant can show the required level of English.
- 4) have not passed the exam on the first try.
- 5) need supervision because of disciplinary action.

	Who can be supervisor	Expectations	Documentation required by COTM
Mentored practice (Level 1)	Registered OT on site, or another health professional in same facility <u>and</u> a registered OT not on site.	<ul style="list-style-type: none"> Applicant will seek and obtain any support needed from the mentor. 	<ul style="list-style-type: none"> Supervision Confirmation Form
Supervised practice (Level 2)	Registered on-site OT with one year experience, or another health professional in same facility <u>and</u> a registered OT not on site.	<ul style="list-style-type: none"> Applicant will develop a "learning contract" with the supervisor to define his/her learning needs. Client related documents need to be co-signed. 	<ul style="list-style-type: none"> Supervision Confirmation Form Learning contract to be submitted to COTM within 1 week of beginning supervised practice.
Mandatory supervised practice (Level 3)	On site, registered OT with equivalent of at least one year full time experience in the area of practice being supervised.	<ul style="list-style-type: none"> Applicant will develop a "learning contract" with the supervisor to define his/her learning needs and to allow for demonstration of the essential competencies of OT. Client related documents need to be co-signed. 	<ul style="list-style-type: none"> Supervision Confirmation Form. Learning contract to be submitted to COTM within 1 week of beginning supervised practice. Written performance evaluation.

All provisional registrants shall use the designation "**COTM Provisional OT**" after their name.