A review of non-traditional occupational therapy practice placement education: a focus on role-emerging and project placements

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Practice placement education has been recognised as an integral and critical component of the training of occupational therapy students. Although there is an extensive body of literature on clinical education and traditional practice placement education models, there has been limited research on alternative placements.

This paper reviews the literature on various practice placement education models and presents a contemporary view on how it is currently delivered. The literature is examined with a particular focus on the increasing range of practice placement education opportunities, such as project and role-emerging placements. The drivers for non-traditional practice placement education include shortages of traditional placement options, health reform and changing work practices, potential for role development and influence on practice choice. The benefits and challenges of non-traditional practice placement education are discussed, including supervision issues, student evaluation, professional and personal development and the opportunity to practise clinical skills.

Further research is recommended to investigate occupational therapy graduates’ perceptions of role-emerging and project placements in order to identify the benefits or otherwise of these placements and to contribute to the limited body of knowledge of emerging education opportunities.

Introduction

In recent years, there has been a major shift in the delivery of health care from a medical model to a community health model (Baum 2002). In response to the current change in health care delivery, occupational therapy practice has become more complex and diverse (Fisher and Savin-Baden 2002b, Thomas et al 2005). Occupational therapy programmes have a responsibility to acknowledge the changing nature of the health care environment and prepare students adequately for professional practice (Prigg and Mackenzie 2002). Practice placement education has been recognised as an integral and critical component of the education of occupational therapy students (Bonello 2001a, World Federation of Occupational Therapists [WFOT] 2002) and occupational therapy educators must continue to ensure that practice placement education is relevant to constantly changing work practices (Lloyd et al 2002). Although there is an extensive body of literature on clinical education and the traditional practice placement education models, there has been limited research on alternative practice placement education (Bossers et al 1997, Aiken et al 2001).

The purpose of this paper is to review the literature on various practice placement education models and present a contemporary view of practice
placement education as it is currently delivered. The paper examines the evidence and expert opinions in the literature, with a particular focus on the increasing range of practice placement education opportunities, such as project and role-emerging placements. The review provides occupational therapy students, educators and clinicians, as well as other health professionals and organisations, with an up-to-date account of existing and potential practice placement education options for occupational therapy undergraduates.

Method

Sources of literature were identified through the online databases CINAHL, Medline, Proquest, Blackwell-synergy, Ingenta and Sciencedirect, using the key words ‘fieldwork’, ‘project placement’, ‘non-traditional fieldwork’, ‘role-emerging’, ‘clinical education’, ‘community placement’, ‘clinical supervision’, ‘occupational therapy’, ‘fieldwork education’ and ‘clinical education’. Various occupational therapy journals were hand searched and sources were also obtained through secondary methods, such as reference lists from published articles.

It is acknowledged that the contemporary term ‘practice placement education’ is currently used to describe undergraduate student placements. Therefore, although this article reviews previous publications that use the term ‘fieldwork education’ to describe student placement experiences, the terms ‘practice placement education’ and ‘practice placement educators’ are used in the article to remain consistent with current literature.

Findings

Purpose of practice placement education

The Revised Minimum Standards for the Education of Occupational Therapists (WFOT 2002, p24) stated that the purpose of fieldwork [practice placement education] ‘... is for students to integrate knowledge, professional reasoning and professional behaviour within practice, and to develop knowledge, skills and attitudes to the level of competence required of a qualifying occupational therapist’. Practice placement education allows students to apply academic knowledge to the clinical setting (Costa and Burkhardt 2003) and offers students an opportunity for real-life experiences while developing clinical skills. It is frequently acknowledged in the literature that practice placement education experience promotes the development of clinical reasoning (Alsop and Ryan 1996, Buchanan et al 1998, Ferraro Coates and Crist 2004) and exposes students to professional role models fundamental to the professional development of students (Aiken et al 2001, Thomas et al 2005). Practice placement education is also seen as an opportunity for students to gain an understanding of how occupational therapy practice fits into the wider scheme of the health care environment as well as its potential for future practice areas (Alsop and Donald 1996). Practice placement education is recognised as an important component in the professional development of occupational therapy students and their future practice as competent therapists.

With the growing trend for alternative and flexible placements (James and Prigg 2004), the literature is characterised by descriptions of ever-increasingly diverse and alternative descriptions of practice placement education. The following section outlines prevailing practice placement education models.

Practice placement education models

Clinical or traditional placements

Practice placements involving a one-to-one ratio of student to occupational therapist practice placement educator are generally called clinical, traditional or role-established placements (Bossers et al 1997, Martin et al 2004, Mulholland and Derdall 2005, Fortune et al 2006). Clinical placements may be in any setting in which an occupational therapist practises, including hospitals, older people’s care facilities and community health services, with the defining feature being a one-to-one apprenticeship model of supervision. Traditional or clinical placements involve direct supervision by an occupational therapist, generally employed within the service, with students practising skills and performing tasks within an established occupational therapy role (Bossers et al 1997, Mulholland and Derdall 2003).

Non-traditional placements

Johnson et al (2006) reported that practice placement education experiences in emerging non-traditional practice settings were first described in occupational therapy literature in the mid-1970s. Almost 20 years had elapsed before there was a significant drive for increased expansion into these alternative practice areas. There are contrasting views on the original motive for expanding practice placement education into non-traditional settings. It has been suggested that a shortage of traditional practice placement education opportunities was the initial driving force (Aiken et al 2001, Casares et al 2003), while some have argued that the changing health care environment created a need for students to experience practice placement education in non-traditional settings (Bossers et al 1997, Aiken et al 2001). Regardless of the origin of non-traditional placements, it is now acknowledged by many that they are becoming an important component of practice placement education programmes (Aiken et al 2001, Friedland et al 2001, Thomas et al 2005).

In the literature, the term ‘non-traditional practice placement education’ is used to describe a variety of supervisory models and contexts. Generally, non-traditional practice placement education does not involve one-to-one supervision by an occupational therapist in a clinical setting. However, non-traditional practice placement
education may involve sites where occupational therapy services are provided but not on a regular basis, such as the voluntary and independent sectors (Fisher and Savin-Baden 2002b).

Role-emerging placements

The term ‘non-traditional’ is often used interchangeably with ‘role-emerging’ when describing practice placement education (Mulholland and Derdall 2005, Wood 2005). Role-emerging placements are designed to promote occupational therapy in a setting where there is not an established occupational therapist role or programme (Bossers et al 1997, Packer et al 2000, Mulholland and Derdall 2005, Thomas et al 2005, Wood 2005). During a role-emerging placement, students explore the potential for, and establish and implement, an occupational therapy role (Bossers et al 1997, Mulholland and Derdall 2005). Students receive direct supervision from a staff member who is not an occupational therapist (Bossers et al 1997, Mulholland and Derdall 2005, Thomas et al 2005, Wood 2005), with indirect supervision off site by an occupational therapist (Bossers et al 1997) or an occupational therapy educator (Thomas et al 2005, Wood 2005). Role-emerging placements therefore fall into the category of non-traditional practice placement education, but have distinctive characteristics.

Project placements

As the name suggests, project placements involve the completion of a project by the student during the practice placement education. Other terms such as ‘participatory community practice’ (Gilbert Hunt 2005, 2006), ‘community based fieldwork’ (Friedland et al 2001), ‘independent community placement’ (ICP) (Mulholland and Derdall 2005), ‘field immersion’ (Ekelman et al 2003), ‘self-directed practica’ (Mackenzie and Drake 1997, cited in Prigg and Mackenzie 2002) and ‘service learning’ (Hoppes et al 2005) are used to describe similar practice education placements. Prigg and Mackenzie (2002) suggested that project placements may include some role-emerging placements, where practice placement education involves students developing a community-based programme with limited on-site supervision by an occupational therapist.

Project placements generally involve the student working independently (Queensland Occupational Therapy Fieldwork Collaborative [QOTFC] 2004) or in pairs (Prigg and Mackenzie 2002, Gilbert Hunt 2005) and completing a project. The project is developed to address the needs identified in collaboration with the agency at the placement setting (Prigg and Mackenzie 2002, Gilbert Hunt 2005). Supervision may be provided by an occupational therapist on site (Prigg and Mackenzie 2002) or, alternatively, direct supervision may be by a non-occupational therapist staff member, with off-site supervision by an occupational therapy educator or occupational therapist (Friedland et al 2001, Gilbert Hunt 2006).

Other models of practice placement education

In addition to the practice placement education models described above, there are various other models described in the literature.

The collaborative model of fieldwork education (CMFE), also referred to as the 2:1 or 3:1 model (Fisher and Savin-Baden 2002b, Bartholemat and Fitzgerald 2007), involves two or more students under the direct supervision of one occupational therapist. The collaborative model is designed to promote self-directed learning, improve time-management skills and encourage students gradually to take an increased responsibility of the supervisor’s caseload (Thomas et al 2005).

The interagency model is a relatively newly proposed practice placement education arrangement, which is a combination of the traditional one-to-one model and a role-emerging placement (Thomas et al 2005). Students divide their time between an occupational therapist and an agency in the community, for example, voluntary and independent agencies, or industry (Fisher and Savin-Baden 2002b, Thomas et al 2005). During interagency placements, students experience both a traditional and a non-traditional practice placement education supervisory model and their benefits (Fisher and Savin-Baden 2002b, Thomas et al 2005).

Interprofessional education (IPE) is a model of practice placement education that provides students with an opportunity to experience working in an interprofessional health care environment (Lumague et al 2006). Students from two or more different health professions (Freedth et al 2001, Lumague et al 2006) are placed together in a health setting, with the aim of developing skills required to work in an interdisciplinary team. Other potential benefits of IPE include learning mutual respect and understanding and developing teamworking skills, with a view ultimately to improving the quality of care provided to clients (Hughes et al 2005, Lumague et al 2006).

International intercultural placements (Whiteford and McAllister 2006) or study abroad programmes (Inglis et al 2000) expose students to a cultural context or setting different from their home country. The main objective is the development of intercultural competency and there is support for the notion that these experiences may assist students to become aware of their ethnocentrism (Inglis et al 2000).

Rationale for role-emerging and project placements

Shortage of practice education places

The literature suggests that a shortage of practice placement education for occupational therapy students is widespread and international and the lack of placement opportunities for undergraduate students is attributed to several factors (Farrow et al 2000, Lloyd et al 2002, Casares et al 2003):

1. The growing demand for occupational therapists (Huddleston 1999, QOTFC 2004) has created an increase
in the number of occupational therapy programmes and enrolment numbers (Prigg and Mackenzie 2002, Thomas et al 2005). The increasing number of students has resulted in a greater demand for practice placement educators (Thomas et al 2005).

2. Staffing and productivity issues have resulted from staff shortages, high caseloads and increased casualisation (part-time) of the workforce (Fisher and Savin-Baden 2002a, Casares et al 2003).

3. The change in nature of practice due to the changing health care system (Friedland et al 2001) has resulted in a decrease in medical model sites (Casares et al 2003) and an increase in multidisciplinary and community-based teams and specialised clinicians (Alsop and Donald 1996, Fisher and Savin-Baden 2002a). Practice changes have reduced the number of clinicians working in areas traditionally used for occupational therapy practice placement education (Casares et al 2003).

4. Adherence to the traditional one-on-one model of supervised placements (Alsop and Ryan 1996, Huddleston 1999, Casares et al 2003), combined with increased student numbers, has resulted in a lack of practice placement education opportunities (Casares et al 2003).

Despite the frequency of literature citing the lack of placements as the driver behind non-traditional practice placement education, other factors have been identified that support the move to developing alternative placement opportunities.

**Health reform and changing work practices**


**Potential role development**

The opportunity to develop an occupational therapy role in a new setting has been identified as a major benefit of role-emerging and project placements (Fisher and Savin-Baden 2002b, Adamson 2005, Gilbert Hunt 2005, Thomas et al 2005). Fortune et al (2006, p234) suggested that by continuing to ‘rely on organisations that employ occupational therapists, we are limited to a finite source of practice education learning options for our students’ and this, in turn, limits the ‘potential new practice niches that occupational therapists could occupy’ (Fisher and Savin-Baden 2002b, Fortune et al 2006, p234). Packer et al (2000) described a role-emerging placement programme in Russia that introduced occupational therapy at the community level, with a view to identifying the need for occupational therapy services in a largely institutionalised health system.

**Dependence on supervisor**

It has been suggested that traditional one-to-one models of practice placement education may create an atmosphere of reliance and dependency (Huddleston 1999, Thomas et al 2005), giving students an unrealistic expectation that close supervision continues after graduating (Huddleston 1999). In her study on practice placement education in Malta, Bonello (2001, p30) found that students were rarely encouraged ‘to be creative and independent in their thinking’ in clinical settings. She also suggested that both educators and students seemed bound by a pattern of supervision, with the principal objective of the experience being demonstration and imitation of selected skills (Bonello 2001b, p30). However, according to the literature, many occupational therapists believe that one-to-one supervision, particularly in early year placements, is essential (Alsop and Donald 1996, Huddleston 1999, Baldry Currens and Bithell 2000, Fisher and Savin-Baden 2002b).

**Influence on practice choice**

There is some evidence in the literature that the practice placement education experience highly influences graduates' preferred area of practice (Hulse et al 2000, Crowe and Mackenzie 2002). Totten and Pratt (2001) stated that graduates were more likely to seek employment in areas where they had had a positive learning experience and had developed familiarity. There is acknowledgement that in some areas of practice there are difficulties with the recruitment and retention of occupational therapists; in particular, rural and remote areas (Fertman et al 2005, Devine 2006) and in mental health (Lloyd et al 2002). Increasing rural practice placement education experience has been identified as one method to improve the recruitment and retention of occupational therapists into rural areas (Devine 2006). Gilbert and Strong (2000) and Beltran et al (2007) discussed the influence of community practice placement education in mental health settings on the improved attitudes of students to people with a mental illness. Lloyd et al (2002) suggested that role-emerging placements may be necessary to ensure that students are able to experience working in a mental health setting.

**Supervisory models**

Generally, supervision during practice placement education is provided by an occupational therapist in the setting of the placement, with some support provided by a university-based occupational therapy educator. During role-emerging and project placements, students do not normally receive
direct supervision from an occupational therapist, with on-site supervision provided by another health professional, such as a social worker, psychologist or nurse (Mulholland and Derdall 2005). Additional support for the student is also provided by an occupational therapist from another agency and an occupational therapy educator (Bossers et al 1997, Friedland et al 2001, Prigg and Mackenzie 2002, Mulholland and Derdall 2005). The amount of off-site supervision varies for role-emerging and project placements, but generally students are expected to work with minimum supervision (Prigg and Mackenzie 2002), with approximately 3-5 hours of supervision per week (Bossers et al 1997, Friedland et al 2001). This arrangement is in line with the WFOT standards that practice placement education is to be supervised and assessed by an occupational therapist or an occupational therapy educator, but he or she is not required to be on site (WFOT 2002).

Benefits of role-emerging and project placements

Client as a person
There is an emphasis on client-student interaction during role-emerging placements as students learn to view the client as a person first rather than there being reliance on diagnosis and disability (Bossers et al 1997, Mulholland and Derdall 2005). In this way, students enable participation in meaningful occupations (Totten and Pratt 2001) and provide intervention that focuses on a client-centred approach.

Clinical reasoning
Clinical reasoning is fundamental to occupational therapy education to ensure that graduates are able to practise effectively in a continually changing health care environment (Velde et al 2006). Feedback from students suggests that self-directed project placements enabled them to solve problems and develop ideas independently and, therefore, assisted in developing clinical reasoning skills (Bossers et al 1997). In this way, students are able to experience fully the demands of occupational therapy practice and reflect on their professional learning (Buchanan et al 1998). Another benefit of placements, particularly in developing countries, is students’ understanding of the impact of an individual’s cultural beliefs on his or her health behaviours (Fitzgerald 2001, Whitelord and McAllister 2006). Ekelman et al (2003) suggested that students are required to self-reflect about their own values and beliefs during field immersion project placements and the limited contact with an occupational therapist practice placement educator is seen as a major driver behind the students’ engagement in self-reflection and self-evaluation (Bossers et al 1997, Banks and Head 2004).

Professional and personal development
According to the literature, role-emerging practice placement education provides opportunities for students to develop a strong professional identity (Wood 2005) and to demonstrate their clinical reasoning (Fisher and Savin-Baden 2002b). The nature of role-emerging and project placements requires students to be independent and resourceful and to work autonomously (Fisher and Savin-Baden 2002b, Thomas et al 2005). Bossers et al (1997) suggested that students involved in role-emerging placements experienced more varied roles due to a lack of hierarchy in the organisation. Fisher and Savin-Baden (2002b) reported that the occupational therapists who participated in their study acknowledged that role-emerging placements offered a valuable opportunity for students to develop essential qualities, such as initiative, creativity and problem solving.

Potential role development
The potential for the development of a role for occupational therapy in settings where there has previously been no occupational therapy service is another proposed benefit of role-emerging and project placements. Exposure to occupational therapy and its benefits, through the establishment of an occupational therapy service by students during practice placement education, has created new employment opportunities for occupational therapists (Bossers et al 1997, Fisher and Savin-Baden 2002a, Banks and Head 2004). Role-emerging and project placements may create opportunities for students to make a contribution to and address identified needs while undertaking their practice placement education requirements (Banks and Head 2004, Gilbert Hunt 2005).

Limitations of project or role-emerging placements

Development of clinical skills
The most frequently cited limitation of role-emerging and project placements perceived by students is the lack of opportunity for hands-on therapy and client contact (Friedland et al 2001, Prigg and Mackenzie 2002). Friedland et al (2001) stated that students involved in their study who undertook a community practice education placement reported that they felt they were missing an opportunity to develop clinical skills and did not seem to value other skills learnt. Alsop and Donald (1996) argued that students need to gain ‘a strong sense of the profession’s core skills and values before qualifying’ and that, to achieve this, students need to practise these skills under the supervision of an occupational therapist. As mentioned previously, the literature shows that many practising occupational therapists strongly support clinical or traditional practice placement education for undergraduate students.

Practice placement education model
Students have reported that one of the challenges of project placement is limited access to practice placement educators (Prigg and Mackenzie 2002). A lack of direct on-site supervision and direction from an occupational therapy practice placement educator and unclear expectations of students have been identified as issues in the literature (Prigg and Mackenzie 2002, Mulholland and Derdall 2005).
Knowledge of profession’s role

Thomas et al (2005) stated that students with a poor knowledge of the role of occupational therapy are challenged by role-emerging placements. Occupational therapists involved in a study by Fisher and Savin-Baden (2002b) reported concerns regarding the expectation of students during ‘role-emerging’ placements to establish an occupational therapy role in a new environment. It was acknowledged that experienced clinicians often had difficulties establishing an occupational therapy role and ‘to place students in this position with minimal direct supervision was considered to be unacceptable’ (Fisher and Savin-Baden 2002b, p279). Students have described the challenge of having to explain the role of an occupational therapist in a role-emerging placement, while they themselves are still in the process of identifying and developing the role (Friedland et al 2001).

Student evaluation

According to Friedland et al (2001), students expressed concerns that traditional assessment tools, which evaluate the acquisition of clinical skills, did not reflect the learning experienced in community placements. More sensitive or adaptable evaluations are needed to ensure recognition of the students’ learning.

Discussion

Recommendations

In order to ensure a quality learning experience, students must be prepared adequately for practice placement education. For the success of any student placement, there must be effective communication between student, practice placement educator and faculty staff (Fisher and Savin-Baden 2002b). Suggestions in the literature to improve practice placement education preparation include briefing (Whiteford and McAllister 2006), pre-placement interviews and relevant coursework prior to placement (Bossers et al 1997). Ekelman et al (2003) suggested that good preparation would assist students to prepare both mentally and emotionally for the practice placement education experience. Students must have a clear expectation of their role, the on-site practice placement educator's role and the role of university educators (James and Prigg 2004). Practice placement educators must ensure that students are aware of the relevance of skills that are gained during traditional and non-traditional placements (Prigg and Mackenzie 2002). In addition, further development of suitable evaluation is required to ensure that all professional experiences in practice placement education are valued (Friedland et al 2001).

Practice placement educators must be adequately prepared and it is suggested that additional training be provided prior to undertaking practice placement education (Prigg and Mackenzie 2002). There is some concern that practice placement educators may feel that they are not required to spend time with the student(s) if they are undertaking a self-directed practice education placement (Prigg and Mackenzie 2002). Training would assist with all aspects of practice placement education, including understanding practice placement educator and student expectations and improving the student evaluation process (Prigg and Mackenzie 2002).

Project placements must be sustainable and focus on building the capacity of the community to continue the process once the placement is completed (Friedland et al 2001). Sustainability is particularly relevant for international and intercultural placements (Fisher and Savin-Baden 2002b, Whiteford and McAllister 2006).

Further study

Despite the acknowledgement that practice placement education is an integral component of a student’s education, there seems to be a lack of research on the learning benefits associated with non-traditional placements. The literature suggests that there needs to be extensive research on all aspects of practice placement education experiences; in particular, the value of the experiences from both the student and former student perspective (Bossers et al 1997, Bonello 2001a, Johnson et al 2006). Similarities between perceived benefits of role-emerging and project placements and other models of practice placement education, such as IPE, have been reported; for example, providing students with an enhanced understanding of the patient as a whole; increased personal and professional confidence (Lumague et al 2006); gaining a greater understanding of the roles of other health professionals; and how to work effectively and collaboratively in a team environment (Freeth et al 2001, Mackenzie et al 2007). The benefits of practice placement education may be perceived differently after graduation (Bonello 2001b) and the influence of these placement experiences on choice of employment and career goals needs to be investigated further (Bossers et al 1997). The overall value and effectiveness of non-traditional placements, including role-emerging, project, international programmes and IPE, needs to be evaluated (Casares et al 2003, Wood 2005, Whiteford and McAllister 2006, Mackenzie et al 2007).

Conclusion

Although non-traditional models of practice placement education have been used for more than 20 years, a perception remains that these types of experiences are inferior to traditional placements. Whiteford and Wright-St Clair (2002) suggested that it is the responsibility of occupational therapy educators to prepare future occupational therapists for practice in diverse settings with diverse client groups and that non-traditional practice placement education may be one solution.
Practice placement education experiences must reflect the anticipated growth for the occupational therapy profession and increasingly diverse areas of practice (Crowe and Mackenzie 2002). Practice placement education has been recognised as one of the most influential factors in the choice of preferred practice areas for students after graduation (Bonello 2001a, Crowe and Mackenzie 2002), but there is currently insufficient evidence on the influence of non-traditional placements on career goals and choices.

Role-emerging and project placements allow students to experience professional life outside the constraints of a clinical setting. Through these non-traditional placements, students are provided with a unique opportunity to take the profession into new territories and, in turn, map the future for occupational therapy practice.

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Key messages
- Practice placement education must remain relevant and reflective of contemporary practice.
- Extensive research on the benefits of non-traditional practice placement education is essential.

What the study has added
This paper aims to provide a contemporary overview of practice placement education for occupational therapy students and highlight benefits and challenges of alternative practice placement education options.

References


