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### What Stops Some Occupational Therapy Practitioners From Providing Fieldwork Education?

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WHAT STOPS SOME OCCUPATIONAL THERAPY PRACTITONERS FROM PROVIDING  
FIELDWORK EDUCATION?

Presented in Partial Fulfillment of the  
Requirements for the Degree of  
Doctor of Occupational Therapy

Eastern Kentucky University  
College of Health Sciences  
Department of Occupational Science and Occupational Therapy

Jacqueline S. Schafer-Clay  
2019

**EASTERN KENTUCKY UNIVERSITY  
COLLEGE OF HEALTH SCIENCES  
DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL  
THERAPY**

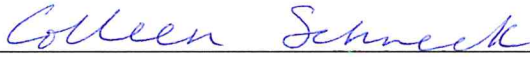
Certification

We hereby certify that this Capstone project, submitted by Jacqueline S. Schafer-Clay, conforms to acceptable standards and is fully adequate in scope and quality to fulfill the project requirement for the Doctor of Occupational Therapy degree.

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**EASTERN KENTUCKY UNIVERSITY  
COLLEGE OF HEALTH SCIENCES  
DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL  
THERAPY**

This project, written by Jacqueline S. Schafer-Clay under direction of Dr. Camille Skubik-Peplaski, Faculty Mentor, and approved by members of the project committee, has been presented and accepted in partial fulfillment of requirements for the degree of

DOCTOR OF OCCUPATIONAL THERAPY

CAPSTONE COMMITTEE

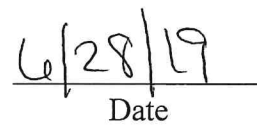


Faculty Mentor

  
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Committee Member

  
Date

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## Executive Summary

**Background:** A critical fieldwork shortage exists for the profession of occupational therapy and an evidence gap was found; literature with practitioners who do not provide fieldwork education was missing.

**Purpose:** The purpose of this capstone project was to identify the barriers that stop some occupational therapy practitioners from providing fieldwork education and what benefits and supports may motivate these same individuals to become fieldwork educators.

**Theoretical Framework.** The Model of Human Occupation and Person Environment Occupational Performance Model emphasize how occupations, such as fieldwork education, are completed within the context of various social and physical environments and how one's motivation guides the choice to be or not be a fieldwork educator. These theories guided the survey question design and provided the framework for interpreting the results.

**Methods.** A quantitative descriptive and correlational study with an online survey design, with 25 closed ended questions was distributed through snowball sampling across the United States. Responses were received from 42 states plus the District of Columbia. There were 493 opened surveys, 465 that responded to at least question one, and 296 were completed from practitioners who did not provide fieldwork education.

**Results.** Descriptive results of this capstone indicated that time (75.4%), caseload (68.3%), and flexibility of placement schedule (61.7%) were the top site barriers to fieldwork education. Whereas, the most challenging personal barriers were time to educate a student (47.1%), quality of student treatment (38.4%), and decreased productivity (37.9%). Only 25.5% of respondents felt they were not professionally ready to provide fieldwork and 63.7% indicated that they were prepared to do so. Surprisingly, 39.3% of respondents had never been asked to provide fieldwork education.

**Conclusions:** This capstone adds to the body of OT literature and closes the evidence gap that was identified with practitioners who do not provide fieldwork education.

Surprisingly results indicated participants feel professionally ready and are well prepared to provide fieldwork education, yet many have never been asked to do so. AFWCs should find a way to ask more practitioners to provide fieldwork education and promote the benefits of hosting students for placements.

## **Acknowledgements**

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**EASTERN KENTUCKY UNIVERSITY  
COLLEGE OF HEALTH SCIENCES  
DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**

**CERTIFICATION OF AUTHORSHIP**

Submitted to (Faculty Mentor's Name): Dr. Camille Skubik-Peplaski

Student's Name: Jacqueline S. Schafer-Clay

Title of Submission: What stops some practitioners from providing fieldwork education?

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*Certification of Authorship: I hereby certify that I am the author of this document and that any assistance I received in its preparation is fully acknowledged and disclosed in the document. I have also cited all sources from which I obtained data, ideas, or words that are copied directly or paraphrased in the document. Sources are properly credited according to accepted standards for professional publications. I also certify that this paper was prepared by me for this purpose.*

Student's Signature: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

*J. Schafer-Clay*  
*6-27-2019*



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## **Section 1: Nature of Project and Problem Identification**

Fieldwork education is one of the essential learning components of occupational therapy academic programs (Accreditation Council for Occupational Therapy Education [ACOTE], 2013). It provides hands on experience with clients to assist the student in transitioning into a competent professional practitioner (Ingwersen, Lyons, & Hitch, 2017; Loewen et al., 2017). Practitioners are occupational therapists and occupational therapy assistants who work in various practice settings. Fieldwork education requires students to practice professional communication, evidence-based practice, client centeredness, cultural competence, effective documentation, occupation-based evaluation, and explaining the mission and roles of occupational therapy to clients (Chapman, 2016; Fairbrother, Nicole, Blackford, Vilapakkam Nagarajan, & McAllister, 2016; Sonn & Vermeulen, 2018). ACOTE (2013) requires a minimum of 24 weeks of full-time fieldwork education as part of the occupational therapy academic curriculum and occupational therapy assistants are required a minimum of 16 weeks of full-time fieldwork education for level II placements. Yet, there is a long-term shortage of fieldwork educators for student placements (Braveman & Walens, 1998; Hanson, 2011; Jesus, Landry, Dussault, & Fronteira, 2017; Keller & Wilson, 2011; Phan, McCarty, Mutchler, & Van Lunen, 2012). Fieldwork educators are the people responsible for the mandatory supervision of students while they are on their fieldwork placements and ACOTE (2013) requires a minimum of eight hours weekly of direct supervision by an occupational therapist; occupational therapy assistant students can also be supervised by a licensed occupational therapy assistant. Roberts and Simon (2012) reported there was approximately 6.9 occupational therapists per occupational therapy fieldwork student and 4.88 occupational therapy assistants for each occupational therapy assistant student on fieldwork placement in the United States. This indicates the profession

should not be struggling with a fieldwork shortage. It has been reported there was a 21% decrease in fieldwork education supervisors available (Roberts, Evenson, Kaldenberg, Barnes, & Ozelie, 2015 as cited by Evenson, Roberts, Kaldenberg, Barnes, & Ozelie, 2015). These authors reported even though there are enough practitioners who can provide fieldwork, the number of fieldwork educators has decreased and perpetuated the fieldwork shortage. The barriers and benefits in growing a current fieldwork education program or enhancing the quality of the fieldwork experience were identified (Evenson, Roberts, Kaldenberg, Barnes, & Ozelie, 2015; Fairbrother, Nicole, Blackford, Vilapakkam Nagarajan, & McAllister, 2016; Maloney, Stagnitti, & Schoo, 2013). Many clinicians viewed fieldwork education as an extra duty rather than a core responsibility (Ingwersen et al., 2017; Maloney et al., 2013) thus contributing to the continued shortage of available fieldwork educators. The most common barrier identified as limiting fieldwork education was workload pressures and time (Barton et al., 2013; Evenson, et al., 2015). Lack of space or resources in a clinic also presents limitations on the number of students a fieldwork site can accept (Evenson et al., 2015; Roberts et al., 2015). Another reported barrier was an increase in concern about students' readiness for the challenges of fieldwork (Fairbrother et al., 2016; Hanson, 2011; Thomas et al., 2007). Fieldwork sites also report no available fieldwork educator and poor support or communication from academic programs as barriers to the number of students they are willing to accept (Nichols, 2017; Ozelie, Hansen, Liguzinski, Saylor, & Woodcock, 2018). Some practitioners report a lack of confidence in their own ability to be a fieldwork educator, provide a quality fieldwork experience, or meet accreditation standards (Evenson et al., 2015; Hatkevich & Miller, 2009). Fieldwork educators also indicate a lack of support from the work setting as an additional

barrier to providing fieldwork education (Loewen et al., 2017; Nicholson, Bassham, Chapman, & Fricker, 2014; Ryan et al., 2018).

There are significant benefits to providing fieldwork education, such as: professional development, improved job satisfaction, and motivation to stay up to date with best-practice standards (Ingwersen et al., 2017; Roberts et al., 2015; Ryan et al., 2018; Thomas et al., 2007). These studies reported additional benefits as listed by current fieldwork educators led to higher quality of care, intrinsic personal satisfaction, and improved job satisfaction. Another commonly reported benefit reported by practitioners providing fieldwork education was an opportunity to give back to the profession or university (Evenson et al., 2015; Fairbrother et al., 2016; Hanson, 2011). A relationship between these fieldwork educators and academic programs support advancement of the profession, an opportunity to add more clinical research to the occupational therapy body of evidence, and improves collaboration between the parties to enhance entry level education and curriculum planning (Costa, 2009; Maloney, et al., 2013; Thomas et al., 2007). Current fieldwork educators also report development of or refining of one's supervisory skills as a significant personal benefit to providing fieldwork education (Evenson et al., 2015; Thomas et al., 2007). One of the major benefits to fieldwork sites was recruitment and future employment potential (Keller & Wilson, 2011; Ozelie et al., 2018; Roberts et al., 2015; Thomas et al., 2007). With rehabilitation shortages, especially in rural and isolated areas, fieldwork education creates the perfect opportunity to utilize recruitment to these unique and challenging areas that are under-utilized for fieldwork placements (Maloney et al., 2013; Thomas et al., 2007). It was important that fieldwork educators and academic programs collaborate to maximize the fieldwork education benefits while minimizing the barriers, so fieldwork education

and practitioner workforce capacity might increase to meet the growing demand for rehabilitation professionals (Maloney et al., 2013).

### **Literature Review Summary**

The current literature related to occupational therapy fieldwork was predominantly focused on the important issues of the quality of fieldwork education, student and fieldwork educator preparedness, and perceptions of the fieldwork education placements. A search for studies related to the benefits and barriers of providing fieldwork education and occupational therapy revealed one national study; this study called for research with practitioners who do not provide fieldwork education (Evenson et al., 2015).

Evenson, Roberts, Kaldenberg, Barnes, and Ozelie (2015) used a descriptive exploratory study with a 49-item online survey to gather data on the status of fieldwork sites and understand the perceived barriers and benefits of fieldwork education. In this study, current fieldwork educators provided insight to the challenges they face when providing fieldwork education. The challenges included the growing enrollment of occupational therapy programs, concerns for time, space, productivity, and preparedness to take on the educator role, and the level of support from the academic program. Evenson et al (2015) reported using a snowball sampling within their study and defined it as encouraging participants to forward or share the survey with other practitioners. The authors reported the survey was open over a three-week period to recruit current fieldwork educators who held contracts with 48 academic programs across 41 states and the District of Columbia (DC). In this study there were 1,101 opened surveys and 817 surveys were completed, producing a 74% response rate. This study highlights important information regarding the barriers and benefits of providing fieldwork education from the perspective of current fieldwork educators. There were consistent reasons documented in the literature for the



continued fieldwork site shortage and the need for additional research was evident (Evenson et al., 2015; Fisher, 2013; Maloney et al., 2013; Ryan et al., 2018).

Maloney, Stagnitti, & Schoo's (2013) study reported the occupational therapy workforce shortage was one outcome of the long-term fieldwork site shortage. The limited rehabilitation professionals working in isolated and rural communities has created health disparities for those who needed services in these areas (Jesus et al., 2017; Office of Disease Prevention and Health Promotion [ODPHP], 2016; World Health Organization [WHO], 2018). ODPHP (2016) reported people with disabilities living in isolated or rural areas lack the resources and transportation to access rehabilitation services outside their own community causing additional health concerns for them. Maloney et al (2013) reported that Health Workforce Australia supported clinical education in rural settings to increase the workforce capacity and recruitment to these communities. The Accreditation Council of Occupational Therapy Education (2013) states, educational programs must have documentation and a published policy on how students will complete all program requirements, including fieldwork, in a timely manner and fieldwork contracts must be enough to complete educational requirements according to the program schedule. Therefore, the fieldwork shortage limits the number of students an academic program can accept. Powell, Griffith, and Kanny (2005) studied occupational therapy workforce demands by collecting workforce information from a proportional random sample of 234 from a total of 497 therapy facilities in the northwest United States that employed occupational therapists. One survey was sent to each facility with a request for the person responsible for hiring occupational therapy practitioners to complete it. The authors achieved a 79% response rate, equaling 172 participants, and twenty-four percent of the facilities reported a shortage of occupational therapists and eleven percent reported a shortage of occupational therapy assistants. A predicted

increase in the need for occupational therapy practitioners was reported by 48% of respondents over the next two years and 63% reported difficulty in hiring occupational therapists. This study identified a demonstrated workforce shortage, especially impacting skilled-nursing and long-term care facilities that can lead to permanent changes in service provisions. The authors derive the identified workforce shortage may lead to increased productivity expectations and larger caseloads (Powell, Griffith, & Kanny, 2005).

Powell, Kanny, and Ciol (2008) completed a follow-up study which demonstrated similar shortages and vacancy rates. They surveyed a proportional random sample of 556 facilities across 29 states and reported a 55% response rate. In this study, national vacancy rates were reported as 8.9% for occupational therapists and 7.7% for occupational therapy assistants. This study indicated high numbers of respondents had difficulty filling occupational therapy and occupational therapy assistant positions, 67% and 62% respectively. Similar to Powell, Griffith, and Kanny (2005), this study found facilities expected an increase in the number of jobs for occupational therapists (45%) and occupational therapy assistants (30%) over the following two years. von Zweck (2010) reports similar shortages and challenges with hiring practitioners in Canada. The author reported that in rural areas only 3% of the total mental health rehabilitation staff was occupational therapists and assistants; whereas, the Canadian average of occupational therapists and assistants working in mental health was 11% (Canadian Institute for Health Information, 2009 as cited in von Zweck, 2010). Maloney, Stagnitti, and Schoo (2013) report a greater need for services in remote communities and areas of lower socioeconomic status. There were many under and unserved areas that do not have access to needed rehabilitation services (Jesus et al., 2017; von Zweck, 2010). Maloney et al (2013) and von Zweck (2010) summarized that to be effective at building workforce and fieldwork capacity stakeholders needed to work at

having a voice at the table when decisions are being made at the national, regional, and local levels. As a profession it is beneficial and responsible to grow the occupational therapy workforce to meet increasing demands which can be supported through increased enrollment in occupational therapy and assistant academic programs (Maloney et al., 2013). However, the fieldwork shortage limits the number of students that can enroll in academic programs and increased enrollment puts a strain on current fieldwork (FW) providers (ACOTE, 2013; Maloney et al, 2013).

To meet fieldwork demands, current educators were asked to host students more frequently and this placed an additional burden on an already limited resource (Evenson et al., 2015; Hatkavich & Miller, 2009; Hanson, 2011; Roberts & Simon, 2012). Academic programs needed additional fieldwork sites to meet accreditation standards and accommodate more students (ACOTE, 2013). Adding fieldwork opportunities in these underserved areas was a way to support workforce capacity growth and to expand services in rural and impoverished areas where health disparities were related to lack of access to rehabilitation services (Jesus et al., 2017; ODPHP, 2016). Some of the other recommended solutions to address workforce shortages include: increasing therapist productivity rates, additional fieldwork education opportunities specific to the area of need, and incentive programs to keep therapists in the workforce when they may be considering retirement or a sabbatical from the profession (Powell, Griffith, & Kanny, 2005; Powell, Kanny, & Ciol, 2008; Von Zweck, 2010) .

Workforce shortages increase job stress; which was also called role strain (Barton et al., 2013). The authors hypothesized that therapists who take on additional responsibilities, such as fieldwork education, would have increased stress. This study measured fieldwork educators' role strain and suggested ways to minimize stressors. They utilized a convenience sample from

one university's list of 315 fieldwork sites and had a 73% response rate. Practitioners with 5-10 years' experience who were fieldwork educators, had the highest role strain. A moderate to low job stress was the mean from all responses (Barton et al., 2013). The authors discussed role strain contributors, including practice specialty, years of experience, and being repeatedly asked to host fieldwork students due to the limited number of sites available. Although job stress was not found to be significantly high with fieldwork educators, program enrollment growth without increasing the number of fieldwork educators grows the potential for job stress or burnout from providing fieldwork education (Barton et al., 2013). Adding additional fieldwork educators would reduce the role strain for both fieldwork educators and academic fieldwork coordinators. An academic fieldwork educator (AFWC) is the program's coordinator for fieldwork education. Increasing the number of fieldwork sites available would share the load of responsibility across the profession rather than relying on only a few practitioners (Maloney et al., 2013; Roberts & Simon, 2012).

### **Problem Statement**

Critical analysis of fieldwork literature has affirmed the need for research with practitioners who do not participate in fieldwork education as Evenson et al., (2015) suggested. The Strengths Weaknesses Opportunities and Threats (SWOT) needs assessment for this capstone project identified a clear evidence gap in literature pertaining to the barriers which prevent some occupational therapists and occupational therapy assistants from participating in fieldwork education. The literature was critically analyzed using the SWOT framework and consistently identified time, workload, job stress, and physical space as the primary reasons current fieldwork educators do not accept more students (Evenson et al., 2015; Hanson, 2011; Ingwersen, et al., 2017; Thomas et al., 2007). Yet, the benefits and barriers identified in

previous studies do not adequately represent practitioners who do not provide fieldwork education. The fieldwork education shortage contributes to a growing workforce shortage for rehabilitation professionals, including occupational therapists and occupational therapy assistants (Maloney et al., 2013; Powell, et al., 2005).

In addition, the lack of practitioners in isolated and rural areas has created a significant health disparity for the people who need therapy services in these communities (Jesus, et al., 2017; Maloney, et al., 2013; Powell, et al., 2005). To address the workforce shortage the profession needs to train more entry level practitioners but the fieldwork education shortage limits academic programs' ability to do this (Maloney et al., 2013). A fieldwork contract is an agreement between a work setting and academic program for the site to provide fieldwork education for students. The accreditation council requires an academic program to maintain enough fieldwork contracts so their students can complete the requirements according to the published coursework schedule (ACOTE, 2013). This is a significant challenge, especially as more academic programs are accredited and fieldwork educators continue to be in short supply (ACOTE, 2013; Fisher, 2013; Roberts & Simon, 2012). The problem this capstone addressed was the evidence gap in the literature limited the potential for fieldwork capacity growth. As the profession of occupational therapy continued to struggle with this shortage it was important to identify and minimize the barriers that stop some practitioners from providing fieldwork education.

### **Purpose Statement**

The purpose of this capstone project was to identify the barriers that prevent some occupational therapy practitioners from providing fieldwork education to students. Roberts and Simons (2012) calculated that there were approximately 6.9 potential fieldwork educators for

each occupational therapy student on fieldwork at any given time. There were more than enough potential educators to give students the clinical and practical experience required for completion of their academic curriculum (ACOTE, 2013; Roberts & Simon, 2012). If more therapists provided fieldwork education it would decrease the fieldwork shortage, grow the workforce capacity, and even open doors for fieldwork sites to recruit pre-trained new graduates (Hanson, 2011; Keller & Wilson, 2011; Maloney et al., 2013; Roberts et al., 2015). This benefit was essential for rural and underserved areas who were most affected by the decreased workforce capacity and who have the greatest difficulty filling positions (Powell et al., 2005). Identifying the barriers which prevent practitioners from taking students will make it easier to find innovative solutions to address these issues and invite more practitioners to become fieldwork educators, solving the shortage (Roberts et al., 2015). All stakeholders, including practitioners, clients, educational programs, and the occupational therapy profession as a whole are negatively impacted by this fieldwork shortage. Many practitioners see fieldwork education as an additional duty rather than a professional responsibility and this has perpetuated the fieldwork shortage for at least 20 years (Braveman & Walens, 1998; Ingwersen et al., 2017; Roberts et al., 2015). The workforce shortage, especially in remote and rural areas, has created a lack of service to these areas and an urgent need for practitioners has resulted (Jesus et al., 2017; Maloney et al., 2013). Outcomes of this capstone project will be shared with other healthcare disciplines who struggle with fieldwork shortages and to support improvements in the unmet healthcare needs in rural communities by improving their fieldwork capacity (Keller & Wilson, 2011; von Zweck, 2010).

## **Research Question and Project Objectives**

This capstone project aimed to answer the primary question of what barriers prevent occupational therapists and occupational therapy assistants from providing fieldwork education. Additionally, the following questions served as objectives: what benefits were needed for practitioners to become fieldwork educators, what academic supports were desired by practitioners; what solutions may help minimize the barriers and maximize the benefits of fieldwork; and how can this capstone be shared to close the evidence gap identified.

## **Theoretical Framework**

The Model of Human Occupation is a widely used theoretical model of practice for occupational therapists (Kielhofner, 2008). This model emphasizes occupation-centered practice and explains how occupations become routines and habits. The Model of Human Occupation further emphasizes how occupations, such as fieldwork education, are completed within the context of various social and physical environments and how one's motivation guides the choice to be or not be a fieldwork educator. The practitioner's values, interests, and motivations guide their choice. The Model of Human Occupation is a top down model which places the occupation, fieldwork education, as the central construct. The path of choosing a meaningful occupation is guided by one's motivation and environment. Motivation in this capstone project as well as the practitioners' environment influences their choice to not participate in fieldwork education. Fieldwork education gives students hands on experience in a physical environment, a clinic; while practicing the social and professional skills needed to develop their own unique professional identity as competent entry-level practitioners (Chapman, 2016; Fairbrother, et al., 2016; Sonn & Vermeulen, 2018). Kielhofner (2008) states meaningful occupations facilitate the development of a positive occupational identity, advanced occupational competence, and

improved professional skills; fieldwork education is an occupation and participation can allow the educator to develop advanced professional skills (Nichols, 2017).

Person Environment Occupational Performance is a second theoretical framework (Baum, Christiansen, & Bass, 2015) which influenced this research and assisted in the identification of the need for research with practitioners who do not provide fieldwork education. Person Environment Occupational Performance model encompasses the expansion of fieldwork capacity, teaching through fieldwork experience, and supporting practitioners as they consider becoming fieldwork educators. Fieldwork is a cornerstone for students as they transition from the classroom to competent professional practitioner through hands on engagement in the activity of treating clients under guided supervision (Hanson, 2011; Ingwersen et al., 2017; Roberts et al., 2015). Person Environment Occupational Performance Model describes a collaborative effort to become successfully engaged in meaningful activity (Baum et al., 2015). Students and educators actively engage and collaborate in the learning process of fieldwork to support development of the professional identity within the student. Evidence based practice and theory are merged to promote health, progress, and well-being to assist clients' return to the most independent function possible (Chapman, 2016; Koski, Simon, & Dooley, 2013). Fieldwork students in collaboration with the fieldwork educator learn by doing, putting theory into practice, and experiencing the success of using occupation as an intervention which is an essential component of the model (Baum et al., 2015). Person Environment Occupational Performance model defines working collaboratively with clients to improve skills and remove barriers to progress through engagement in meaningful activity (Baum et al., 2015). The fieldwork educator works collaboratively with the fieldwork student progressing through hands on experiences to improve clinical skills and decision making, including the use of evidence-based theories to promote



progress, understanding, and professional growth in the fieldwork student (Chapman, 2016; Fisher, 2013; Keller & Wilson, 2011). Not every therapist should be a fieldwork educator; it must be a good person and environmental fit for the practitioner to be successful, student centered, and to provide meaningful occupational experiences through fieldwork (Chapman, 2016). The Person Environment Occupational Performance model highlights the interactions between multiple parts to find the balanced fit between the person, environment, and task (Baum et al., 2015). When a good person and environmental fit occurs, the best occupational performance and learning will occur during the fieldwork experience. The student and educator work closely together engaging in practice of clinical activities which promote learning and professional growth for both; while continuing to keep value and quality of care in the forefront of treatment for the clients (Barton et al., 2013; Lopez, Vanner, Cowan, & Shepherd, 2008). Identifying the barriers that stop some practitioners from providing fieldwork may foster improved collaboration between these professionals and academic programs, enhancing the person environmental fit to improve fieldwork capacity.

### **Project Significance**

An ongoing shortage of fieldwork placements for entry level occupational therapy students has been identified (Braveman & Walens, 1998; Chapman, 2016; Ozelie, et al., 2018). Fieldwork education is a required part of all occupational therapy academic programs and is essential to developing competent and prepared practitioners (Fisher, 2013; Evenson, et al., 2015; Ingwersen et al., 2017). Previous research was not found looking at the specific perceived barriers of practitioners who do not provide fieldwork education and this was a missing, but needed, piece of fieldwork shortage research (Evenson et al., 2015). When barriers in this specific population are identified and addressed, fieldwork capacity growth is possible. Adding

some of these practitioners to the fieldwork educator's role and thus decreasing the workforce shortage (Maloney et al., 2013) will decrease the strain on current fieldwork educators and academic fieldwork coordinators. Fieldwork capacity growth will positively impact all occupational therapy stakeholders, including: practitioners, potential clients, and educators (Ingwersen et al., 2017). Adding more practitioners as fieldwork educators decreases the frequency of requests to provide student supervision, decreases the strain on Academic Fieldwork Coordinators to find placements, improves diversity of the opportunities available for fieldwork, and increases the number of entry level clinicians to provide a healthcare service. Increasing the number of clinicians available will support decreased vacancy rates, will decrease the workforce shortage, and will help address the health disparities due to the workforce shortage (Maloney et al, 2013). Many rehabilitation and healthcare professions were struggling with similar issues and were feeling the impacts of workforce capacity strain (Barton et al., 2013; Jesus, et al., 2017; Powell, et al., 2005). Collaborating and sharing evidence was important in overcoming the growing demands for rehabilitation practitioners, especially as underserved communities and populations experience health disparity related to the lack of rehabilitation services (Keller & Wilson, 2011; von Zweck, 2010).

### **Section 1 Summary**

Current fieldwork education research had not looked at the specific barriers of practitioners who do not provide fieldwork education as Evenson, Roberts, Kaldenberg, Barnes, and Ozelie (2015) suggested. There was a long-term need for increased fieldwork capacity and this capstone project added to the body of evidence and addressed this evidence gap. Once identified, these barriers can be addressed and more practitioners could be added to those who will provide fieldwork education. Adding practitioners to the fieldwork education pool would

reduce the demand on current fieldwork educators and support fieldwork capacity growth across the profession (Evenson et al., 2015; Thomas et al., 2007).

## **Section Two: Review of the Literature**

A thorough literature review was completed searching CINAHL complete; Cochrane Database; Eastern Kentucky University (EKU) ProQuest; EBSCO host; Open access online; OTseekers; National Board Certification of Occupational Therapists ProQuest; Researchgate; and Taylor and Francis online. The following terms were used to search each database: barriers, obstacles, challenges, difficulties, issues and internship, practicum, fieldwork, clinical education with and without a profession identified. When a profession was identified, the terms used were OT, occupational therapist, occupational therapy, therapy, speech therapy, physical therapy, and allied health. The search rendered articles on fieldwork education, that mostly focused on the fieldwork benefits and barriers current educators reported; what equates to a high-quality fieldwork experience from student and fieldwork educators' perspectives, unique fieldwork education models and settings, and studies that looked at the knowledge and experience gained from fieldwork. No studies were found that investigated the benefits and barriers of fieldwork from the perspective of practitioners who do not participate in fieldwork education. Evenson et al (2015) identified the need for research in this area.

Professional, work site, and personal barriers negatively influence practitioners' willingness to accept students for fieldwork placements (Jensen & Daniel, 2010). The most frequently cited barrier to fieldwork education was time and workload pressures (Ingwersen et al., 2017; Maloney et al., 2013; Ozelie et al., 2018; Ryan et al., 2018). One study looked at the additional work time it took while providing fieldwork education (Ozelie, Hansen, Liguzinski, Saylor, & Woodcock, 2018). This study included 22 clinicians who completed a before fieldwork placement time log and then completed a log while supervising a full-time level II student. The authors reported that when supervising a student an average of 25 extra minutes a

day was spent at work. Roberts et al. (2015) found that of 817 survey respondents, occupational therapy and occupational therapy assistant fieldwork educators, 41% reported workload pressure and time constraints as a barrier to fieldwork education. Maloney, Stagnitti, and Schoo (2013) reported 72.2% of 113 respondents found lack of time as the biggest barrier to fieldwork education. Evenson, Roberts, Kaldenberg, Barnes, and Ozelie (2015) also found that lack of time remained the most reported challenge to fieldwork education even though Ozelie, Hansen, Liguzinski, Saylor, and Woodcock (2018) reported providing full-time level II fieldwork education took an average of only 25 minutes extra a day. In a previous study, it was reported there was not a decrease in productivity when providing fieldwork education (Ozelie, et al., 2015). Barton et al., (2013) found that practitioners reported a positive impact to completing work tasks, time management, and decreased role strain when supervising fieldwork students. The authors concluded that therapists who provide fieldwork education in addition to their practitioner role and those who did not feel prepared to offer fieldwork education had higher levels of work stress (Barton et al., 2013). The additional work time needed when hosting a fieldwork student was typically was spent on training site specific skills, reflective activities for promoting learning, reviewing evidence-based practice standards, and supporting the student as he or she was developing their professional identity (Ozelie, et al., 2018). The study reported, most participants were not strained by the additional requirements of providing fieldwork including the slight increase in work time because they felt the need to support the growth and development of the profession (Barton et al., 2013; Ozelie et al., 2018). As the number of occupational therapy programs in the United States increase, fieldwork educators were asked to provide supervision more frequently (Evenson et al., 2015; Hanson, 2011; Roberts & Simon, 2012) which challenges an already limited resource and increases job strain (Barton et al., 2013).

Increasing the number of practitioners who are willing to supervise students would decrease the demand and grow the number of students being educated thus supporting a decrease in the workforce and fieldwork shortages (Maloney et al., 2013).

Fieldwork sites also report a limited amount of space and other resources to accommodate students; limiting their ability to accept more students (Evenson et al., 2015; Hanson, 2011; Thomas et al., 2007). When there were not desks, computers, or other resources available fieldwork sites were hesitant to accept student placements; especially when multiple students request for the same time and place. One study found 28% of 817 fieldwork educators surveyed listed limited resources as the second most reported barrier to accepting students (Roberts, Evenson, Kaldenberg, Barnes, & Ozelie, 2015). Varying models of fieldwork education were used to increase fieldwork capacity in existing programs (Loewen et al., 2017; Ryan et al., 2018). Yet, the authors of one study found 68% of respondents reported using only the one educator to one student model of fieldwork education (Ryan et al., 2018). Loewen et al. (2017) reported that even though the most common educator to student ratio was 1:1; it took less supervision time, created less stress, and did not take any additional resources to use the 1 educator per 2 students model. This study reported fieldwork students can share space, other resources, and peer to peer education and reflection required less supervision time than the traditional 1 student to 1 educator model. Another study found similar results in analyzing the benefits of alternate fieldwork educator to student ratios (Fairbrother et al., 2016). The authors found peer to peer support and learning was essential to a positive fieldwork experience for both students and practitioners and allowed students less time with their supervisors than other ratios. Loewen et al. (2017) concluded that the 1:1 model was not best practice due to these factors.

The availability of practitioners to supervise fieldwork students due to part-time work schedules, high turnover rates, and unfilled positions was a challenge for current fieldwork programs (Evenson et al., 2015; Hanson, 2011; Ryan et al., 2018). Part-time work schedules or reduced work staff, due to workforce shortages or open positions, will decrease the number of student fieldwork placements available (Hanson, 2011). Powell, Kanny, and Ciol (2008) report a national occupational therapy vacancy rate between 8-9% and a lack of applicants as the primary challenge to filling vacancies, especially in rural areas. New practitioners with less than one year of clinical experience are limited to supervise only level I fieldwork students (ACOTE, 2013). These and other practitioners express concerns about their ability and readiness to provide level I and level II fieldwork education (Evenson et al., 2015). The authors also reported site factors which limit fieldwork education, including available, qualified, and willing supervisors. Thomas, Dickson, Broadbridge, Hopper, Hawkins, Edwards, and McBryde (2007) found 31% of the 132 survey respondents reported staffing issues; such as high turn-over rates and part time employees as barriers to providing fieldwork education. Maloney, Stagnitti, and Schoo (2013) found in rural Australia the private rural sector was under-utilized for fieldwork placements partially due to the limitations of practitioner skills and experience. This study also reported when practitioners have past experience supervising students, they were more likely to accept future fieldwork placements.

Hanson's (2011) study found that educators who had a bad experience with unprepared Level II students were less likely to accept future fieldwork students. Following Hanson's (2011) study other research in fieldwork education inquired about students being unprepared for the fieldwork experience (Evenson et al., 2015; Maloney et al., 2013; Ozell et al., 2018; Ryan et al., 2018). Students were reported to be lacking in professional communication skills,

problem solving, clinical reasoning, and evidence-based decision making (Hanson, 2011). Concerns with student abilities was the third biggest concern of current fieldwork educators and created a decrease in future student placement with the site (Evenson et al., 2015). This study also found that the most desired support the academic program could offer was high quality students who were prepared for the demands and challenges of fieldwork. The authors specifically mentioned a lack of research regarding best practice for ensuring students were adequately prepared for fieldwork challenges. Shaping future clinicians can be stressful and this was compounded when the student was poorly prepared for the demands of fieldwork (Hanson, 2011; Ozelie et al., 2018). Maloney, Stagnitti, and Schoo (2013) reported 15.3% of the 113 survey respondents, all from private practice, found the fear of unprepared students was a barrier to accepting students for fieldwork. Hanson (2011) reported the stress from working with unprepared students decreased the educator's willingness to accept future students, especially from the same academic program. A potential successful remediation strategy could be for the educator to begin the fieldwork at just the right challenge and then grade activities and expectations throughout the experience based on the student's experience, strengths, and progress (Chapman, 2016). Much of the student's growth comes from self-reflection, constructive communication, regular feedback, and diverse experiences led by the fieldwork educator throughout the placement (Chapman, 2016; Fisher, 2013). Readily available academic fieldwork coordinators also help decrease fieldwork educator stress with open communication of the student's learning style and strengths, as well as a clear understanding of the curriculum and the expectations of fieldwork (Chapman, 2016; Evenson et al., 2015).



Poor support and lack of open communication from the academic program was a barrier to a fieldwork educator's willingness to accept students (Evenson et al., 2015; Maloney et al., 2013; Phan et al., 2012). A study of athletic trainers reported they had an optional fieldwork and poor collaboration between the academic program and the clinical educators (i.e.: fieldwork educators) created a disconnect between the academic and clinical portion of the curriculum inhibiting the student's overall learning experience (Phan, McCarty, Mutchler, & Van Lunen, 2012). Nichols (2017) suggests academic benefits for fieldwork education, such as access to the university library, that would enhance the fieldwork education experience for students. Practitioners would have access to more evidence-based practice information from which to draw upon during fieldwork placements and everyday practice (Nichols, 2017). Fieldwork educators expect a good relationship with the academic program including efficient support, training, and regular communication preferably through electronic means (Evenson et al., 2015; Hanson, 2011). It has been suggested that academic programs offer continuing education for fieldwork educators to improve the quality of the clinical program, increase cohesiveness between the clinical experience and the educational curriculum, and create the opportunity for collaboration between them (Hanson, 2011; Nichols, 2017).

There were four studies regarding the barriers and benefits of fieldwork education, from the perspective of current educators (Evenson et al., 2015; Hanson, 2011; Ryan et al., 2018; Thomas et al., 2007). Collaboration between practitioners and academic programs is essential to maximize the benefits and decrease the barriers of fieldwork education (Evenson et al., 2015; Maloney et al., 2013). It is important to know and eliminate the potential barriers and understand the benefits of fieldwork education from the perspective of the practitioners who do not provide fieldwork. The primary benefit of fieldwork education was hiring and recruitment

potential (Hanson, 2011; Keller & Wilson, 2011; Roberts et al., 2015; Thomas et al., 2007). Hanson (2011) reported practitioners liked the idea of shaping the skills and professional identities of future practitioners who could be future employees. Similarly, Hatkevich & Miller (2009) stated, finding a way to accept students for fieldwork may lead to an increase in recruitment to underserved areas. It was understood that level II fieldwork has a strong influence on students' job selection (Hatkevich & Miller, 2009; Keller & Wilson, 2011; Maloney et al., 2013; Roberts et al., 2015). This was a significant benefit for rural and underserved areas that struggled with recruitment and filling vacant positions (Jesus et al., 2017; Maloney et al., 2013).

### **Section Three: Methods**

Quantitative analysis was objective and the numerical results were clear and concrete (Daniel, 2016). Quantitative data allowed for comparisons between variables, such as the differences in responses of occupational therapists and occupational therapy assistants and their barriers to providing fieldwork. In this capstone project, comparisons were conducted analyzing the relationship between responses, years of experience, and population descriptors as key factors. An online survey was chosen to implement for ease of participation, increased distribution, and higher success rate in finding participants who were not currently providing fieldwork education. Following design of the survey, an internal review board (IRB) exempt application was submitted to the Eastern Kentucky University IRB and approved (Appendix A). The theoretical framework and literature review guided the capstone project design in hopes of influencing positive change to reduce occupational therapy's fieldwork capacity shortage. The methodology for this capstone was also modeled after a national study of fieldwork educators (Evenson, et al., 2015), as the authors concluded that additional fieldwork research was needed with practitioners who do not provide fieldwork education.

For this capstone, as many participants as possible were recruited through state occupational therapy associations from across the United States, social media outlets, handing out and mailing postcards with a QR code link to the anonymous survey, and contacting licensed occupational therapy practitioners through state board licensing lists. Initially, a list of seventeen state associations was compiled based on ease of accessibility and willingness to share the capstone project information and survey link at no charge (Appendix B). State associations were contacted between October 15-29, 2018 via email or a contact form on their website. If no response was received from the first contact a second email or contact form request was sent

three weeks after the first. A list of committed occupational therapy associations, at the beginning of the study, are found in Appendix B. There were 17 states who initially agreed to post the capstone project cover letter and survey link at no charge. An additional 15 states were contacted and did not respond; 1 state responded with “unable due to the number of requests received” and one state responded with a “yes” but required a substantial fee. Attempts to locate additional participants occurred between December 2018 and March 2019 through internet searches for occupational therapy state boards, employers, and additional occupational therapy related pages via vendors, websites, Facebook, and LinkedIn network connections. Throughout the capstone project, all 50 state occupational therapy associations were contacted through email or social media. Prior to the American Occupational Therapy Association Convention and Expo (March 25, 2019) marketing postcards were designed and purchased for distribution during convention activities (Appendix C). At the convention, postcards were handed out at the Eastern Kentucky University table, handed to individuals during poster presentations, and were shared during academic fieldwork coordinator and Affiliated State Association President meetings. By the end of the capstone 42 states plus the District of Columbia had practitioners that participated.

In this capstone the survey was informed by current research and examples of other successful surveys found during the literature review. Dr. Mary Evenson (personal communication, September 5, 2018) provided a copy of the *National Fieldwork Education Survey* and it was reviewed. Although this survey was a good model and a highly regarded study, the questions were not geared toward practitioners who do not provide fieldwork. Also, it was found that the *National Fieldwork Education Survey* could not be adapted for use in this capstone project. Two other survey authors were contacted but no response was received after two attempts.

An electronic survey was chosen to improve access to the survey, increase the number of participants, and to streamline the data collection and analysis. Participants self-selected to participate on a volunteer basis. Self-selected and snowball sampling does not allow for randomization; therefore, it was not possible to determine sampling errors or make general inferences to a broader population. Therefore, a pilot study of the survey was completed prior to sending the survey to the occupational therapy associations. Following the pilot study for this capstone, it was decided to offer an incentive for completing the survey- a random drawing for one of two \$25 gift cards- were offered. Winners were chosen from the participants who voluntarily completed a registration form at the end of the survey. The information provided on the registration form was not connected to the anonymous survey responses. The registration form was available through a separate URL address that participants were redirected to if they selected yes, they chose to enter the drawing. The survey information remained completely anonymous and the registration form was kept separated from the survey.

### **Inclusion and Exclusion Criteria**

For this capstone practitioners were defined as occupational therapists and occupational therapy assistants who worked in a variety of settings. Fieldwork education was defined by ACOTE (2013) as a required part of every occupational therapy academic program where students worked in a supervised practice setting. Level II fieldwork was required to include 24 weeks of full-time experience for occupational therapy students; whereas, occupational therapy assistant students were required 16 weeks of full time experience (ACOTE, 2013).

*Inclusion:* Participants were licensed practitioners who did not provide fieldwork education in their current job. *Exclusion:* Practitioners who were not licensed, who worked in research or

academia, or who provided fieldwork education in their current job were not eligible for participation.

The first question of the survey was an inclusion question and read: Q1. In your **current** job, have you supervised a Level I or Level II OT/OTA fieldwork student? (Previous supervision of a student in a different job/position but not your current job=no)

Yes

No

When a practitioner chose a yes response the survey ended and no additional questions were presented. When no was chosen as the answer the survey continued. This assisted in generating a participation rate by totaling the number of responses to Q1 versus the number of “no” responses to question one. Participation rate was estimated by totaling the number of opened surveys versus the number of total responses to Q1. An inclusion rate was also calculated by comparing the total number of responses to Q1 versus the number of participants who responded no.

## **Methods**

A quantitative descriptive and correlational online survey was designed with approximately 25 closed ended questions and was distributed through snowball sampling to practitioners throughout the United States. The survey was sectioned into 3 blocks: inclusion and demographic, work setting barriers and benefits, and personal barrier and benefit questions. A thorough review of questions and results from previous studies of current fieldwork educators informed the question style, pertinent questions to ask, and length of survey for highest completion rate. A pilot study of the survey tool was completed by 33 participants with academic and advanced practitioner backgrounds who provided feedback regarding ease of use,

clarity, flow of the questions, and assurance questions adequacy addressed the capstone project purpose. The pilot study provided insight into survey design and improved the confidence in the survey items that they clearly addressed the research purpose. Recommended changes that were implemented included question rewording to decrease bias and improve clarity, adding section headers to organize question flow, and additional answer choices on some questions.

Following the pilot and revision, a survey link, copy of the internal review board approval (Appendix A), and a cover letter (Appendix D) was sent to all state associations who agreed to post it for their members' participation (see Appendix B). Then, a second concentrated effort occurred to contact additional state associations and online media outlets for posting was also completed with an additional 13 state associations posting the brief description and anonymous survey link. Snowball sampling was the primary recruitment tool because therapists who saw the survey link could share it with other practitioners.

Quantitative analysis using Qualtrics Stats iQ was conducted to identify the top barriers participants reported preventing them from being fieldwork educators; find the most desired benefits; and analyze the statistically significant differences between variables (Qualtrics, 2018). To date, there was no known information available on the number of practitioners who do not provide fieldwork education. The literature review did not find any studies looking at the barriers to fieldwork from the perspective of practitioners who do not participate in fieldwork, and as Evenson et al (2015) recommended. The outcomes of this capstone project were valuable to the profession of occupational therapy and other health disciplines who struggle with fieldwork education capacity.

## Outcome Measures

Outcome measures were organized and analyzed using Stats iQ from the Qualtrics online survey platform (Qualtrics, 2018). This analytical program offers online, email, and phone support which allowed quantitative comparisons between groups, questions, and geographical areas accurately and efficiently. The data from the survey was analyzed to determine what common barriers practitioners face which prevented them from taking fieldwork students in their current position.

Previous research informed this capstone project survey design and a pilot study was completed by 33 participants to test the clarity, ease of use, and to assure the questions clearly met the research objectives. Pilot study feedback was provided and focused on challenges with navigating through the survey, need for question organization; suggestions to decrease wording bias and improved question clarity. The survey for this capstone was then revised to increase the clarity, improve ease of navigation, and reorganization of questions based on responses and feedback from the pilot study. The survey had three sections demographic information, work setting information, and personal considerations based on pilot feedback. Closed ended responses were variations of 5-point Likert style and ranked order. Sample questions were provided in Table 1.

**Table 1. Sample survey questions**

Demographic Information:	Possible responses:
Q2. Please indicate your current practice/licensure:	<ul style="list-style-type: none"> <li>○ Licensed Occupational Therapist (OT)</li> <li>○ Certified Occupational Therapy Assistant.</li> <li>○ Not Licensed/Certified</li> <li>○ Work in OT/OTA education or research</li> </ul>
Q4. Which state is your current work setting located?	List of 50 states plus the District of Columbia



<p>Q5. Which population descriptor does the area your job is located in best fit:</p>	<ul style="list-style-type: none"> <li>○ Population of 50,000 or more people</li> <li>○ Population between 49,999 and 2,500 people</li> <li>○ Population of 2,499 or less people</li> <li>○ unsure</li> </ul>
<p><b>Work Setting Information:</b></p>	
<p>Q8. Does your work setting have adequate physical space to accept level I or level II OT/OTA fieldwork students</p>	<ul style="list-style-type: none"> <li>○ Adequate</li> <li>○ Neither adequate nor inadequate</li> <li>○ Inadequate</li> </ul>
<p>Q9. Does your work setting express concerns with productivity when accepting level I or level II OT/OTA fieldwork students</p>	<ul style="list-style-type: none"> <li>○ Strongly agree</li> <li>○ Somewhat agree</li> <li>○ Neither agree nor disagree</li> <li>○ Somewhat disagree</li> <li>○ Strongly disagree</li> </ul>
<p>Q12. Has your work setting experienced benefits from providing fieldwork education to an OT/OTA student?</p>	<ul style="list-style-type: none"> <li>○ Definitely yes</li> <li>○ Probably yes</li> <li>○ Might or might not</li> <li>○ Probably no</li> <li>○ Definitely no</li> </ul>
<p><b>Personal Considerations:</b></p>	
<p>Q15. What benefits would you get from providing an OT/OTA student fieldwork education? (rank in order: 1st most important benefit to 5th least important benefit.)</p>	<ul style="list-style-type: none"> <li>○ Opportunity to give back to the profession</li> <li>○ Practice my leadership skills</li> <li>○ Motivation to stay updated on latest practice standards</li> <li>○ Improve my time management</li> <li>○ To support recruitment at my work location</li> </ul>
<p>Q18. I don't have enough time to provide level I or level II supervision to an OT/OTA fieldwork student</p>	<ul style="list-style-type: none"> <li>○ Strongly agree</li> <li>○ Somewhat agree</li> <li>○ Neither agree nor disagree</li> <li>○ Somewhat disagree</li> <li>○ Strongly disagree</li> </ul>
<p>Q21. I have never been asked to provide level I or level II supervision to an OT/OTA fieldwork student</p>	<ul style="list-style-type: none"> <li>○ Definitely true</li> <li>○ Probably true</li> <li>○ Neither true nor false</li> <li>○ Probably false</li> <li>○ Definitely false</li> </ul>

## **Ethical Considerations**

The online survey was anonymous; therefore, the ethical considerations were minimized. Anonymous surveys present minimal to no risk of social, psychological or physical harm to the participant (Qualtrics, 2018). The participants self-select on a volunteer basis, can choose not to answer any question, and/or end the survey at any time. Due to the minimal to no risk, this research qualified for an exempt application for ethical research on human subjects. The Internal Review Board of Eastern Kentucky University approved this capstone project (Appendix A). A brief description of the research was included with each post of the anonymous survey link and the full disclosure was online as an introduction in order to provide it for each participant who opened the survey.

## **Timeline**

The primary author's Citi Training was completed September 12, 2018. Preliminary documents, needs assessment, and annotated bibliography were written in OTS: 902 and posted on this author's online portfolio August 9, 2018. All 50 state occupational therapy associations were contacted twice between September 12 and November 28, 2018 and 17 agreed to post a survey link with a brief description of the capstone (see Appendix B). Qualtrics with Stats IQ was purchased and the online survey was created. The IRB for this capstone was approved January 4, 2019 and the pilot study was completed January 18, 2019. The survey was revised based on the pilot feedback and shared with all participating state associations between March 6-10, 2019 with the first response received March 9, 2019. A Facebook search from March 8-15, 2019 revealed 36 occupational therapy pages and the description and survey link were posted on 24 of them. Additionally, 14 requests for permission to post on Facebook pages were sent with 5 agreeing to allow the survey post. All authors shared the survey link in various ways, including

Facebook, LinkedIN, discussion boards, and blogs. Postcards with a QR code were printed and shared with practitioners during the annual American Occupational Therapy Association Conference and Expo April 4-7, 2019. The week of April 15, 2019, five weeks since the initial postings on Facebook, a follow up post was completed on each site. State licensing boards were also contacted obtaining email addresses or physical addresses for licensed practitioners in each state without responses. Emails or postcards were sent to members of the states obtained. A request to resend announcements through all the state associations took place the week of April 15, 2019. Continued monitoring of response rates, reports, data, participation numbers, states represented in the responses, and beginning trends in the data were observed. On May 15, 2019 a final post to all associations and social media outlets with a status update for each state was completed with a reminder that the survey would close in two weeks. May 31, 2019 the survey and data collection closed. Stats IQ was then ran, statistical analysis was completed, followed by organization of data, write up of the final capstone report, and preparation of the final capstone presentation. A proposal for American Occupational Therapy Association Conference 2020 was completed June 5, 2019. The capstone project, presentation, submission of the capstone report was completed June 28, 2019. Immediately following graduation, work to have the capstone research published.

## **Conclusion**

Health disparities in people with disabilities are common due to inequitable access to healthcare, rehabilitation, and prevention; which has created an urgent public health issue (Jesus et al., 2017; Office of Disease Prevention and Health Promotion [ODPHP], 2016; World Health Organization [WHO], 2018). There was a growing need for rehabilitation professionals, but most disciplines face a workforce shortage which creates an undersupply and uneven distribution

of the rehabilitation resources (Jesus et al., 2017; Powell et al., 2005). Approximately fifteen percent of the world's population live with a disability. More specifically, 56.7 million people in the United States live with a disability. As society ages and medical advancement continues people with disabilities have become the fastest growing minority in the world (Jesus et al., 2017; ODPHP, 2016; WHO, 2018). Powell, Griffiths, and Kanny (2005) identified an occupational therapy workforce shortage and followed up with another study showing similar results in 2008 (Powell et al., 2008). The literature review for this capstone project did not identify more recent information regarding occupational therapy and occupational therapy assistant vacancy rates. However, the authors also found that rural or remote practitioner openings were the most difficult to fill. Jesus et al. (2017) found that rehabilitation professions, including occupational therapy, were experiencing a workforce shortage which presented a significant hardship for people with a disability in rural and remote areas. Maloney, Stagnitti, and Schoo (2013) report that the Australian government recognizes fieldwork education as one tool to build a stronger workforce within healthcare. Providing opportunities for fieldwork education, especially in remote and rural areas, was key to making occupational therapy services more available and accessible to everyone (Evenson et al., 2015; Hanson, 2011; Nicholson et al., 2014) and decreasing the pressing health disparity in rural and remote areas (Jesus et al., 2017; ODPHP, 2016; WHO, 2018).

Occupational therapy has struggled with a 20-year fieldwork shortage; which limits the number of qualified practitioners being educated and introduced into the workforce each year (Braveman & Walens, 1998; Jesus et al., 2017; Phan et al., 2012; Roberts & Simon, 2012). The fieldwork educator shortage further perpetuates the workforce shortage and decreases the availability of occupational therapy to those in remote and rural areas (Jesus et al., 2017; Keller

& Wilson, 2011; Maloney et al., 2013). It is essential that fieldwork placements be diverse for recruitment of therapists to these rural and remote areas (Hatkevich & Miller, 2009; Sonn & Vermeulen, 2018; Thomas et al., 2007). Fieldwork experiences in these unique underserved areas open doors to build confidence and comfort for new graduates who would be more likely to work in similar areas (Nicholson et al., 2014; Thomas et al., 2007). Evenson et al., (2015) stated “further research is needed to examine the group of therapists who do not participate in fieldwork education” (p. 5). As the need to increase the occupational therapy workforce capacity continues, it is important to encourage all available practitioners to say “yes” when asked to supervise fieldwork students (Roberts & Simon, 2012). Through the literature review a research gap was found and it was the goal of this capstone project to identify the needs of practitioners who do not participate in fieldwork and minimize the barriers that stop them from providing fieldwork education. By working to minimize the barriers and maximize desired benefits growth in occupational therapy fieldwork education will happen by adding these practitioners to the fieldwork educator pool.

## **Section Four: Results and Discussion**

The purpose of this capstone project was to investigate what barriers prevent some occupational therapists and occupational therapy assistants from providing fieldwork education from a large national sample of practitioners. Previous studies (Evenson, Roberts, Kaldenberg, Barnes, & Ozelie, 2015) and a comprehensive literature review identified an evidence gap in the fieldwork literature from the perspective of this population. Practitioners who do not provide fieldwork education should be carefully considered as members of the profession who can help solve the fieldwork shortage and who have the potential to be added to the fieldwork educator pool. Data collection, via the revised survey, ran from March 8 through May 31, 2019 and the information was analyzed using the statistical analysis software Stats iQ (Qualtrics, 2018).

### **Results**

The objectives of this capstone project were to identify the barriers and benefits practitioners identify as influencing their decision not to provide fieldwork education, including work setting barriers, desired benefits, and needed supports from academic programs. The data was analyzed for correlational and descriptive relevance using visual models and chi squared tests. Descriptive results summarize a collection of quantitative information numerically. Correlational results show if two variables were related and how strongly they were related (Qualtrics, 2018). When describing statistical test results the p-value was the measure of statistical significance, indicating whether the relationship between the two variables was consistent enough that it was unlikely to be a coincidence (Qualtrics, 2018). A value less than 0.05 means that a relationship was statistically significant and unlikely to be a coincidence. Two variations in results were used for this capstone, percentage and mean values. Percentages for this capstone were calculated based on the number of responses for an answer versus the total

number of responses to the question. Mean for this capstone was calculated based on the total value of a response divided by the number of responses.

There were 493 opened surveys, 465 responded to at least question 1 (Q1), and 296 met the inclusion criteria of not currently providing fieldwork education. The calculated response rate was 94.3% of open surveys versus those who responded to at least Q1 and 63.66% of respondents qualified for inclusion. There was no way of determining the number of potential respondents due to snowball sampling. Participation was voluntary and participants could choose to skip any question they did not want to answer; therefore, not all questions received 296 responses. Respondents represented levels of experience from less than a year to over 15 years of practice (see Table 2) and covered a wide variety of areas of practice (see Figure 1).

**Table 2. Participants' years of experience**

<b>Years of Experience</b>	<b>% of Total Responses</b>
Less than 1 year	7.58%
1 year to 3 years	17.33%
3 years 1 day- 6 years	19.13%
6 years 1 day - 10 years	12.27%
10 years 1 day - 15 years	9.75%
More than 15 years	33.94%
Total	100%

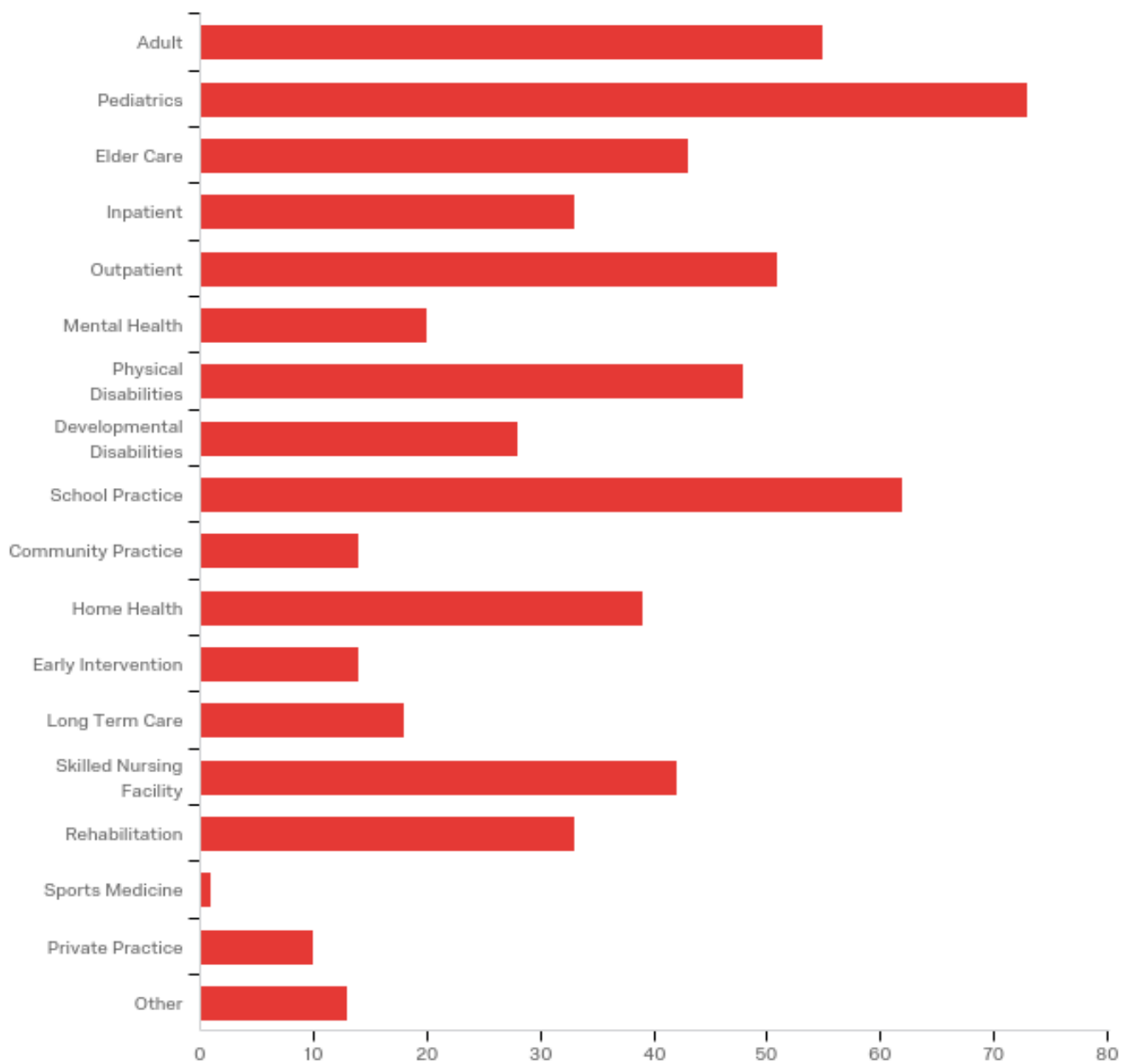


Figure 1. Distribution of participants' areas of practice

Responses were received from 42 states and the District of Columbia (Appendix E). Occupational therapists represented 81.0% of the responses, occupational therapy assistants'



responses were 15.9% of the total, 1.0% were not licensed, and 2.1% worked in education or research.

Descriptive results of this capstone project indicated that time (75.4%), caseload (68.3%), and flexibility of placement schedule (61.7%) were the top site barriers to fieldwork (FW) education. Whereas, the most challenging personal barriers were time to educate a student (47.1%), quality of student treatment (38.4%), and decreased productivity (37.9%). When ranked as one most important to five least important, the participants' personal perceived benefits from most to least important were: opportunity to give back to the profession (mean: 2.15), motivation to stay updated on latest practice standards (mean: 2.66), practice my leadership skills (mean: 2.77), improve my time management (mean: 3.63), and support recruitment at my work location (mean: 3.70). When asked what supports a practitioner would need to become a fieldwork educator, responses weighted heavily on decreasing time and paperwork related to supervising a student (See Table 3). The most valuable support needed to take a student was the response-the academic program be readily available in the event of an issue. The second most valuable support was contact by the student before placement and providing sample fieldwork objectives as third most important. It was important that academic programs provide time saving supports, flexibility in scheduling, and educate practitioners on the benefits of being a fieldwork educator in order to increase fieldwork capacity.

**Table 3. What supports from an academic program would help you provide fieldwork education?**

<b>Factor</b>	<b>% of responses marked as extremely or very important</b>
Support from the academic program is readily available in the event of an issue.	87.86%
Contact from the student in advance of placement.	75.73%

Provide sample fieldwork objectives.	73.30%
Help me establish my fieldwork schedule of student expectations.	66.02%
Ensure all requirements (vaccination, background check, fingerprinting) are complete and provided to me a minimum of 3 weeks before placement.	65.53%
Provide a fieldwork manual.	65.53%
Offer continuing education related to fieldwork education.	63.59%
Offer some flexibility of schedule for student placement.	61.65%
Contact from the Academic Fieldwork Coordinator weekly during a student placement.	30.10%

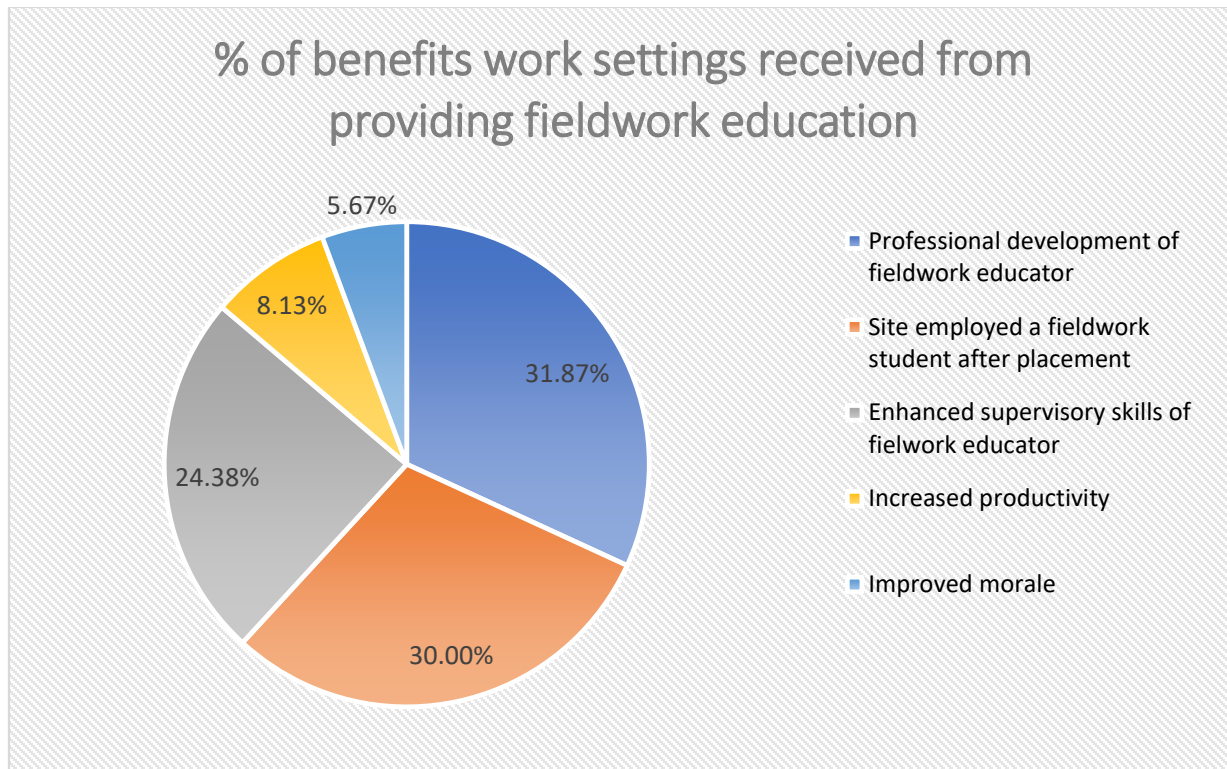
**\* Listed from most to least important**

Respondents of this capstone described their self-perceptions of their readiness to provide fieldwork education. Of the respondents, only 25.5% of respondents felt they were not professionally ready to provide fieldwork and 63.7% indicated they were prepared to do so. Over half of the respondents (72.97%) indicated they understood the benefit of peer to peer learning during fieldwork, 69.6% reported they could talk with a struggling FW student, and 52.4% felt they had access to the resources they needed to provide FW. Question 7 (Q7) asked, do other practitioners in your work setting provide fieldwork education and 46.38% of respondents reported working in a setting where others participated in FW (see Table 4).

**Table 4. Percentage of responses for Q7**

Do others in your work setting provide fieldwork education?	Percentage of responses
Yes	46.38%
No	41.30%
I'm the only practitioner in the work setting.	10.51%

Results of this capstone found 66.1% of fieldwork sites benefited from hosting students (*figure 2*). Professional development of the fieldwork educator was the most cited benefit a work site gets; whereas the second most reported benefit was sites employed a fieldwork student following a placement (*figure 2*).



**Figure 2. Benefits work settings have received from hosting fieldwork students**

Work settings may or may not consider the support that an academic program provides when deciding to take students. Only 20% of the responses from this capstone reported their work site did not consider the academic support provided, while 33.9% reported they did, and 46.1% were uncertain. Participants of this capstone reported that 67.65% of them have adequate space to host fieldwork students. Privacy concerns were not a reported concern and 48% of responses said privacy was not an issue at their work setting when deciding to take fieldwork students. When asked if a work site considered productivity as a barrier to taking fieldwork

students 39% reported it was, 31.53% reported it was not, and 29.46% were unsure if it was a barrier. When given a choice of 8 reasons work settings say no to hosting students, the most frequently chosen to least chosen challenges are in Table 5.

**Table 5. Which factors likely influence your work setting when deciding NOT to take a fieldwork student? (Q11)**

Factor:	Number of responses:
Time available	181
Caseload	164
Flexibility of schedule	148
Available fieldwork educator	127
Willing fieldwork supervisor	122
Preparedness of students	108
Relationship with the academic program	106
Complexity of clients	85
Space available	68

Correlational analysis for this capstone project was conducted using chi squared tests. Analysis revealed a statistical significance ( $p = <0.00001$ ) between years of experience and the question-I do not feel ready to offer FW. Practitioners with more than 6 years of experience were more likely to feel prepared to offer FW than those with less than 6 years of experience. Another statistical correlation between years of experience and geographical area practitioners worked emerged. Practitioners in metropolitan and rural areas were more likely than suburban practitioners to want academic programs to offer continuing education related to fieldwork education ( $p=0.0168$ ). There was a statistically significant relationship between years of

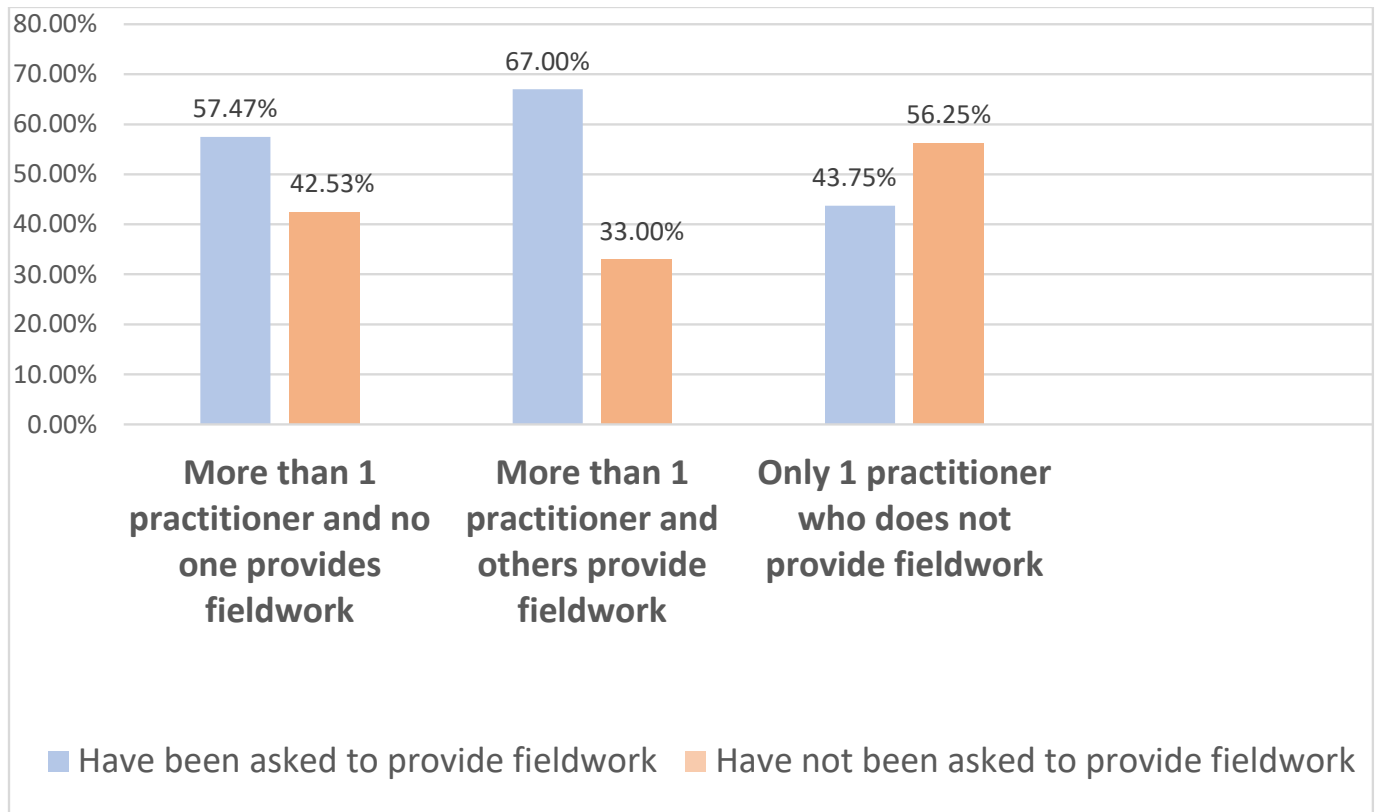
experience and the response, I have never been asked to provide fieldwork education ( $p=0.0285$ ) provided in Table 6. Surprisingly, practitioners with more than 15 years of experience were less likely to have been asked to provide fieldwork than those practitioners with 6 years 1 day to ten years of experience.

**Table 6. Percentage of practitioners who have not been asked to provide fieldwork education in relation to years of experience**

Years of experience:	Percentage of practitioners who have not been asked to provide fieldwork:
Less than a year	66.7%
1-3 years	48.6%
3 years 1 day to 6 years	42.9%
10 years 1 day to 15 years	33.3%
More than 15 years	32.4%
6 years 1 day to 10 years	28.6%

When correlational comparison of practitioners who had not been asked to provide fieldwork and the question do other practitioners in your setting provided fieldwork, no statistical significance was found ( $p= 0.431$ ).

Surprisingly, results of this capstone included, 39.3% of respondents who reported they had never been asked to provide fieldwork education. Also, more respondents in single practitioner settings had not been asked to provide fieldwork than those in the same setting who were asked and said no (see figure 3). Unexpectedly, 33% of respondents who worked in settings with multiple practitioners where others provided fieldwork education had not been asked to participate (see Figure 3).



**Figure 3. Comparison of the percentage of practitioners who have and have not been asked to provide fieldwork across three work setting descriptors**

Another unanticipated outcome of this capstone project was comprehensive comparative analysis of responses of occupational therapists versus the responses of occupational therapy assistants revealed no statistical differences between the two groups.

## Discussion

This capstone project's research question was what stops some occupational therapy practitioners from providing fieldwork education. Two types of barriers were identified; work setting barriers and personal barriers. Work setting barriers were defined for this capstone as factors that stop a work setting from agreeing to host fieldwork students. Personal barriers were defined for this capstone as things that stop some practitioners from agreeing to be a fieldwork

educator. The top work setting barriers of this capstone project were time (75.4%), caseload (68.3%), and flexibility of placement schedule (61.7%). When analyzing the work setting barriers from responses of this capstone project, only a small percentage (14.64%) report space to accommodate students being an issue. Jensen (2010) reported the most significant factor preventing a setting from taking fieldwork students was limited resources. Evenson et al (2015) reported time and workload, physical space and resources, and concerns about student abilities were the top reported barriers. The results of this capstone indicated space was not a barrier to taking fieldwork students meaning a significant difference between the 2015 study of current fieldwork educators and this 2019 capstone of practitioners who do not provide fieldwork education. Practitioners from this capstone continued to report that providing fieldwork education contributes to decreased productivity despite research to the contrary (Ozelie, Janow, Kreutz, Mulry, & Penkala, 2015). This capstone's results were different than past studies of current fieldwork educators, indicating practitioners who do not provide fieldwork education may have unique needs and perceptions. However, this capstone project found the top personal barriers to fieldwork education were time to educate the student, quality of student treatment, and decreased productivity. The personal barriers identified in this capstone were more closely related to those found in previous studies (Evenson et al., 2015, Jensen, 2010, Maloney et al., 2013). The results of this capstone indicate practitioners continue to believe providing fieldwork education contributes to decreased productivity despite research to the contrary (Ozelie, Janow, Kreutz, Mulry, & Penkala, 2015). It is important to ensure congruency and open communication on these issues in order to increase the number of willing fieldwork educators and make certain a high-quality fieldwork experience will be provided. When possible options for flexibility in

placement schedules and educating practitioners about the personal benefits of providing fieldwork education may help improve fieldwork capacity.

Responses of this capstone found the opportunity to give back to the profession, motivation to stay up to date on practice standards, and practicing leadership skills as the top benefits with improved time management (mean 3.63) and supporting future recruitment (mean 3.70) as the fourth and fifth most desired benefits. The person environment occupational performance model (PEOP) defined person and environment factors as they influence the performance of occupations; the intrinsic(person) factors being internal and extrinsic (environment) factors being external (Baum, Christiansen, & Bass, 2015). The most important benefit identified in this capstone was considered an intrinsic (personal) motivation and the second and third factors were extrinsic (external) motivations for providing fieldwork education. This means it is important for academic programs to emphasize both extrinsic and intrinsic benefits as academic fieldwork coordinators work to convince more practitioners to provide fieldwork. Other unexpected findings were the responses- improved time management skills and supported recruitment for the work setting- were rated as less of a barrier for most participants, time management would seem a valuable benefit of providing fieldwork education due to increased productivity expectations. In previous studies recruitment was reported as a top benefit of fieldwork education (Hanson, 2011; Keller & Wilson, 2011; Roberts et al., 2015; Thomas et al., 2007); to find such a difference in this capstone was unexpected. Many academic programs offer these and other resources to potential fieldwork educators however, some potential educators may not realize this assistance was readily available. Academic programs should make the benefits of supervising students clear and concise prior to asking practitioners to participate in fieldwork education. Although future recruitment was a motivator



for the site to agree to host fieldwork students (Jensen & Daniel, 2010; Keller & Wilson, 2011; Thomas et al., 2007), from the results of this capstone future recruitment was not a motivator to those practitioners who do not provide fieldwork.

The top supports practitioners reported they needed to become fieldwork educators was the academic program to be readily available during a placement, contact from the student in advance of placement, provide sample fieldwork objectives, and help establish my fieldwork schedule meaning they would be motivated by time saving supports from the academic program. This capstone found that self-perceptions of respondent's readiness to provide fieldwork indicated most believed they were professionally ready, knew how to talk with a struggling student, understood the benefits of peer to peer learning, and had access to resources needed for providing fieldwork education. The results of this capstone indicated those who do not provide fieldwork were actually, well prepared to become fieldwork educators and may understand the benefits of supervising more than one student at a time. Yet, previous studies show the most common fieldwork model used was the one supervisor to one student model (Evenson et al., 2015; Loewen et al., 2017; Ryan et al., 2018). Fieldwork capacity could be increased if one supervisor for multiple students was used more often. Previous research shows when students can work with other students learning, reflection, and overall satisfaction was improved and less fieldwork educator time was required (Loewen et al., 2017). The results of this capstone project indicate practitioners who do not provide fieldwork education were aware of these benefits and when asking them to provide fieldwork request for them to take more than one student. Almost half of practitioners in this capstone worked in a setting where others provide fieldwork. In these settings fieldwork contracts, site specific objectives, fieldwork manuals, and student schedules would already be established. These practitioners have the requested supports available and the

paperwork requirement for providing supervision at these facilities would be decreased. Their work settings were open to hosting fieldwork students and they would have the added support of other practitioners in their setting who provided fieldwork. These practitioners could be added as high-quality fieldwork educators. As our profession continues to struggle with a fieldwork shortage, it is important to ask and add as many practitioners to the fieldwork pool as possible.

According to this capstone project's results 66.1% of work settings were benefiting from hosting fieldwork students including professional development of fieldwork educators, hiring a fieldwork student after their placement, and enhanced supervisory skills in the fieldwork educators. Similar to this capstone's results, previous studies of fieldwork educators found potential recruitment and student completion or development of resources as the top two benefits of providing fieldwork education (Keller & Wilson, 2011; Thomas et al., 2007). In one study, improved staff skills ranked as the third top benefit to the work settings that provided fieldwork education (Thomas et al., 2007). The results of this capstone indicate work setting benefits of providing fieldwork education has some similarities across practitioners who do and do not provide fieldwork education. However, results of this capstone project found it was unclear if the work setting considers the support offered by the academic program when choosing to accept fieldwork students, as the numbers for each response were closely split. When looking at personal desired benefits, practitioners indicated they were motivated by readily available support from the academic program.

When looking at correlational results of this project, practitioners with six or less years of experience feel less prepared to offer fieldwork education than those with more than six years of experience. Meaning, providing continuing education to those with less clinical experience may help them become professionally ready to be fieldwork educators sooner. Nichols (2017) found

that when practitioners completed a three-hour course their knowledge, skills, and confidence improved. Improving less experienced practitioners' skills and confidence could support adding these practitioners as high-quality fieldwork educators. Results of this capstone found those in metropolitan and rural areas were more likely than those in suburban areas to want continuing education courses. As academic fieldwork coordinators consider these results and ways to motivate more practitioners to become fieldwork educators it is important to share the desired motivators with practitioners as much as possible. Those practitioners with less experience were also those who were more likely to respond, I have never been asked to provide fieldwork education (see Table 6). Encouraging new practitioners, including those with less than a year of experience, to provide fieldwork education is a way to build fieldwork education capacity. The accreditation council allows practitioners with less than a year of experience to provide level I fieldwork education (ACOTE, 2013). When practitioners begin their careers participating in fieldwork education, it would enhance their abilities to continue providing fieldwork throughout their careers. This capstone found those practitioners in single OT settings were also more likely to respond, I have never been asked to provide fieldwork education. Previous research indicated non-traditional and rural settings have been underutilized for fieldwork education (Jesus et al., 2017; Maloney et al., 2013). This capstone confirms under-utilization of single practitioner settings for fieldwork. Students need diverse experience and challenges during their fieldwork placements. Rural and single practitioner settings have unique challenges, the greatest vacancy rates, and pose a dire need (Maloney et al., 2013; Nicholson, Bassham, Chapman, & Fricker, 2014; WHO, 2018; Powell et al., 2005). Student fieldwork experience in these unique settings would support recruitment to these rural and underserved practice settings (Keller & Wilson, 2011; Maloney et al., 2013). In this capstone, 39.3% of respondents had never been asked to

provide fieldwork education. This demonstrates an opportunity to invite more practitioners to the fieldwork pool. Reframing the professional responsibility should encourage those who have not been asked to initiate the process by reaching out to nearby universities or to their alma mater to express their willingness and interest. In practices with more than one occupational therapy practitioner where others provide fieldwork, 33% had not been asked to provide fieldwork. Previous studies indicated part-time workers or covering multiple facilities as barriers to increasing fieldwork capacity (Fairbrother et al., 2016; Jesus et al., 2017). Variable fieldwork educator to student ratios, such as two part-time educators sharing one or more full-time student, would support fieldwork capacity growth. Academic fieldwork coordinators should encourage fieldwork sites to try various educator to student models and to ask all available practitioners to be fieldwork educators.

Statistical differences between occupational therapists and occupational therapy assistants was not significant due to the low number of occupational therapy assistants responding to this survey. The response rate of occupational therapy assistants was only 15.88% with estimated rates between 30-35% of licensed therapists holding OTA licenses. A lower than average response rate from OTAs indicated unique responses could make a bigger than normal impact on the data thus making it unclear if these particular correlational results were reliable.

The Model of Human Occupation (MOHO) reported motivation is what guided practitioners toward or away from an occupation (Kielhofner, 2008). It was important to identify the motivations that may encourage practitioners who do not provide fieldwork education to choose to participate and positively impact fieldwork capacity growth. Person Environment Occupational Performance model (PEOP) indicated intrinsic (person) and extrinsic (environment) factors work collaboratively to improve or inhibit occupational performance

(Baum et al., 2015). ACOTE (2013) requires academic fieldwork coordinators (AFWC) work collaboratively with fieldwork educators to ensure a high-quality placement and students and practitioners collaborate to support the transition to a competent entry level professional. The results of this capstone support additional collaboration between AFWC and respondents who did not provide fieldwork education in order to invite them to participate and support the decrease of occupational therapy's critical fieldwork shortage.

### **Strengths and Limitations of the Project**

The sample size of 296 respondents for this capstone project was a strength. This large sample improves the confidence in the results of this capstone project. Snowball sampling was not random therefore potential sampling errors were not identifiable; that was why a large sample size was attempted. Since there was no data on the number of practitioners who do not provide fieldwork education it was impossible to identify a representative sample; meaning the results of this project have limited generalizability. However, the national sample of participants for this capstone included 42 states plus the District of Columbia and provided more variety in the data than a local or regional study would provide; therefore, the margin of error was decreased. Another limitation of the capstone project was that occupational therapy assistants' participation was limited. Evenson et al., (2015) reported 5% of 817 participants were from occupational therapy assistants. In this capstone project, occupational therapy assistants represented 15.88% of the 296 total qualifying responses. However, lists of licensed practitioners from three states (West Virginia, Connecticut, and South Carolina) indicated occupational therapy assistants were 32% of licensed practitioners and licensed occupational therapists were 68%. Similarly, the number of new graduates for the 2017-2018 school year indicated 31% of graduates were occupational therapy assistants and 69% were occupational

therapists (American Occupational Therapy Association, 2018). Sample size was the number of participants in a research study. A smaller than representative sample size of occupational therapy assistants decreases the confidence of the comparative analysis between occupational therapists and occupational therapy assistants for this capstone project. A sample size of 30-35% would give more credibility to the comparative analysis between these two groups. This could potentially increase or decrease with a higher response rate of occupational therapy assistants and it cannot be presumed these results of no statistical difference between the two groups would remain the same.

The large sample size of this capstone was advantageous because it provides more data to analyze that aids in determining averages of quality tested samples, or the mean. The large sample from 42 states plus the District of Columbia was a strength because it provides more variety in the data than a local or regional study would provide. Increasing the reliability of accurate mean values the geographical diversity in this capstone decreases the impact of outliers and prevents skewing of the results. The larger sample also decreases the margin of error that can happen with smaller potentially atypical respondents. The results from this sample size of 296 qualifying respondents was a better estimation of the averages and more reliable statistical analysis since this project tested more subjects who covered a national area.

### **Implications for Practice**

The fieldwork shortage has been well documented in the literature for over twenty years (Braveman & Walens, 1998; Evenson et al., 2015; Ryan et al., 2018). Finding innovative ways to address this shortage is a professional responsibility for all stakeholders. Literature also indicates a perception of fieldwork being an extra duty rather than a core responsibility. This contributes and perpetuates the ongoing shortage of fieldwork educators (Ingwersen, Lyons, &

Hitch, 2017; Maloney et al., 2013). This capstone project aimed to add insight to the barriers that stop some practitioners from providing fieldwork education to find innovative solutions and add more practitioners to the fieldwork education pool. This capstone project revealed a high percentage (39.3%) of participants who had never been asked to provide fieldwork (see *figure 3*) and an even higher percentage of single practitioner settings who have not been asked to provide fieldwork education. These practitioners were well prepared to be fieldwork educators and offer an opportunity for students to learn unique skills in an area of practice with the highest vacancy rate (Powell et al., 2008). More specifically, academic programs may be able to add fieldwork educators to their current pool by asking single practitioner settings to provide fieldwork, including non-traditional or community settings which were commonly underutilized (Maloney et al., 2013). Practitioners who do not provide fieldwork education have unique barriers, desired benefits, and needed academic support. The results of this capstone indicated a need for academic programs to ask more practitioners to participate in fieldwork education and tailor the supports and benefits offered to those they are asking.

Practitioners from this capstone perceived giving back to the profession and motivation to stay up to date with practice standards as the most important benefits of providing fieldwork. These same practitioners desired time saving supports; such as: providing a fieldwork manual, sample fieldwork schedule and objectives, offering university library use, and offering fieldwork related continuing education. These supports are often provided from the academic program and results indicate they would appeal to practitioners who do not currently provide fieldwork education.

## **Future Research**

A preliminary need prior to additional research is a census of occupational therapists and occupational therapy assistants; the number of practitioners in rural, urban, and metropolitan areas; as well as the number of practitioners who do and do not provide fieldwork education. This would support future research projects by allowing for an improved methods design and dissemination of a representative study of practitioners. A census could potentially allow for a randomized control study of those who do not provide fieldwork education. Additionally, literature would be strengthened in the area of fieldwork education if a comparative study of practitioners who do and those who do not provide fieldwork education was completed. Also, a potential discrepancy between what barriers work settings report and what individual educators describe as challenges could be examined as a future research project. Differences between work setting expectations and individual educator needs may present an unstudied barrier. A longitudinal study comparing the differences of practitioners who begin participating in fieldwork education early and those who begin later would provide new insight for innovative solutions to promoting fieldwork capacity growth.

## **Summary**

This capstone project was an important addition to the fieldwork education body of literature. It provides preliminary insight into the specific barriers and benefits experienced by practitioners who do not provide fieldwork education and demonstrate that these are unique to this group. These practitioners could potentially be added to the pool of fieldwork educators. Since the majority of these practitioners perceived time saving supports, giving back to the profession, and motivation to keep up to date on practice standards as the most important



benefits to providing fieldwork education, it is important that academic programs provide these supports and incentives to practitioners.

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## Appendix A: Eastern Kentucky University Internal Review Board Approval

Hello Jacqueline Schafer-Clay,

Congratulations! The Institutional Review Board at Eastern Kentucky University has approved your IRB Application for Exemption Certification for your study entitled, "**Identifying the barriers which prevent occupational therapist (OT) and occupational therapy assistants (OTA) from providing fieldwork education**" as research protocol number 2121. Your approval is effective immediately and expires three years from the approval date.

Exempt status means that your research is exempt from further review for a period of three years from the original notification date if no changes are made to the original protocol. If you plan to continue the project beyond three years, you are required to reapply for exemption.

**Principal Investigator Responsibilities:** It is the responsibility of the principal investigator to ensure that all investigators and staff associated with this study meet the training requirements for conducting research involving human subjects and follow the approved protocol.

**Adverse Events:** Any adverse or unexpected events that occur in conjunction with this study must be reported to the IRB within ten calendar days of the occurrence.

**Changes to Approved Research Protocol:** If changes to the approved research protocol become necessary, a description of those changes must be submitted for IRB review and approval prior to implementation. If the changes result in a change in your project's exempt status, you will be required to submit an application for expedited or full IRB review. Changes include, but are not limited to, those involving study personnel, subjects, and procedures.

**Other Provisions of Approval, if applicable:** None



### Appendix B: List of State Associations

<i>State:</i>	<i>Association name:</i>	<i>How the association agreed to share the survey link and cover letter:</i>
Alaska	AKOTA	Will send 2 email blasts to members including the survey link and description.
California	OTAC	Distribute survey link to all members; placement of link on OTAC's Facebook, LinkedIn, and Twitter pages; and posting on OTAC research webpage.
Florida	FOTA	Will post on FOTA research webpage.
Georgia	GAOTA	Will post on GAOTA webpage and Facebook page.
Idaho	Id-OTA	Will post on Id-OTA research webpage.
Iowa	IOTA	Post survey link on Facebook page.
Kansas	KOTA(online.org)	Will consider posting on website once IRB approval and information is sent to them.
Kentucky	KOTA(web.org)	Will post on KOTA webpage.
Michigan	MiOTA	Will post link on MiOTA website and Facebook page.
New Hampshire	NHOTA	Will post on NHOTA webpage.
North Carolina	NCOTA	Will post on NCOTA research webpage.
Ohio	OOTA	Will post on OOTA webpage.
Pennsylvania	POTA	Will post on POTA website
South Carolina	SCOTA	Will post on SCOTA webpage.
Tennessee	TNOTA	Will post on TNOTA Facebook page.
Texas	TOTA	Will post on TOTA research webpage.
Vermont	OTVermont	Will post on OTVermont Facebook page.

## Appendix C: Marketing Postcard



Occupational therapists and Assistants, **who do not provide fieldwork education in their current job**; are invited to participate in a research study and register for a drawing to receive 1 of 2 amazon \$25 gift cards. The survey will remain anonymous regardless if you complete the drawing registration or not. Please share the link/QR code with other OTs and OTAs. The goal of this survey is to understand the barriers individual occupational therapists and occupational therapy assistants face which prevent them from providing fieldwork education. The survey typically takes **less than 10 minutes** to complete. The survey is voluntary and is completely anonymous. Due to the anonymity there is no perceived risk related to participation. Eastern Kentucky University Internal Review Board has approved this research. Scan the QR code on the front to read the full disclosure and begin the survey. If you have any questions or concerns please contact: [jacqueline\\_schafe4@mymail.eku.edu](mailto:jacqueline_schafe4@mymail.eku.edu)

**SURVEY NAVIGATION TIP:** Use the blue arrows at the bottom of the page to advance the survey after responding, **DO NOT** use your browser's forward or back buttons as this will close the survey.

## Appendix D: Research Cover Letter

### Requesting Clinical and Community Occupational Therapists and Occupational Therapy Assistants' Participation

You are invited to participate in a research study and register for a drawing to receive 1 of 2 amazon \$25 gift cards. The survey will remain anonymous regardless if you complete the drawing registration or not. The goal of this survey is to understand the barriers individual occupational therapists (OT) and occupational therapy assistants (OTA) face which prevent them from providing fieldwork education for OT/OTA students. The benefits of participation include supporting occupational therapy research; intrinsic positive feelings for participating; and helping to identify barriers to fieldwork education which benefits the occupational therapy profession.

The survey typically takes **less than 10 minutes** to complete and can be started and stopped throughout the completion process. Entering the drawing will require completion of a registration form including personal information. The registration form and personal information are a separate web address from the survey and will be used only for the drawing and to send gift cards to the winners, in no way will the personal information provided be connected to your survey responses. This research has been approved by Eastern Kentucky University internal review board.

The survey is completed on a voluntary basis and is completely anonymous. You may stop the survey at any time or skip any question you choose not to answer without penalty. Due to the anonymity there is no perceived risk related to participation in the study. Choosing "**Proceed to survey**" below constitutes agreement of understanding of this research; consenting to participate; and allowing anonymous information to be shared for teaching purposes according to the accepted standards for confidentiality in human subject research. If you have any questions or concerns please contact:

jacqueline\_schafe4@mymail.eku.edu

This survey link is posted in various locations, including: state association websites or Facebook pages and has been shared through LinkedIn and other social media outlets. It can be sent or forwarded by practitioners, academic programs, and/or fieldwork facilities who choose to share the survey link. Please complete the survey only one time even if multiple requests are received, seen, or sent.

I greatly appreciate your time and participation and your support of occupational therapy research. Please feel free to share/forward this survey link. If you would like to forward this survey to other practitioners, especially those who do not provide fieldwork education, please copy and paste the link.

If you choose to participate please click on Proceed to survey below. If you choose to participate and enter the drawing, I will inform you via the information you provide if you win a \$25 amazon gift card. Thanks and good luck!

**SURVEY NAVIGATION:** Use the blue arrows at the bottom of the page to advance the survey after responding, **DO NOT** use your browser's forward or back buttons as this will close the survey.

### Appendix E: Final State Participation List

State:	% of Total Responses
Alabama	1.47%
Alaska	0.00%
Arizona	1.84%
Arkansas	1.10%
California	21.69%
Colorado	2.21%
Connecticut	1.47%
Delaware	0.00%
District of Columbia	0.37%
Florida	1.47%
Georgia	0.74%
Hawaii	0.00%
Idaho	1.10%
Illinois	1.47%
Indiana	1.47%
Iowa	1.47%
Kansas	0.74%
Kentucky	11.76%
Louisiana	0.74%
Maine	0.37%
Maryland	1.47%
Massachusetts	0.37%
Michigan	6.62%
Minnesota	1.84%
Mississippi	0.37%

Missouri	0.74%
Montana	0.00%
Nebraska	0.00%
Nevada	0.00%
New Hampshire	2.21%
New Jersey	2.21%
New Mexico	0.00%
New York	3.68%
North Carolina	1.47%
North Dakota	5.51%
Ohio	4.78%
Oklahoma	2.21%
Oregon	2.94%
Pennsylvania	3.31%
Rhode Island	0.37%
South Carolina	2.21%
South Dakota	0.74%
Tennessee	0.74%
Texas	0.74%
Utah	0.74%
Vermont	0.37%
Virginia	0.37%
Washington	1.10%
West Virginia	1.10%
Wisconsin	0.37%
Wyoming	0.00%
Total	100%