Challenges in Transitioning From Clinician to Educator for Occupational Therapy Assistant Program Faculty Members

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Abstract

There is a transitional process that occurs when an occupational therapy (OT) practitioner assumes the role of an educator. Various challenges have been reported, though few directly address occupational therapy assistant (OTA) education. This study aimed to identify challenges faced by OT practitioners when they transition from working in a clinical setting to working as OTA faculty members. A 29-item online survey was developed covering three key areas of new OTA faculty members' responsibilities: a) Learning the Educator Role, b) Curriculum and Class Development, and c) Interacting with Students. The survey was distributed through the American Occupational Therapy Association Program Directors' and Academic Fieldwork Coordinators' listservs, the Education Special Interest Section listserv and direct email to faculty members. Two hundred twenty-three participants completed the survey. Eight items were rated by 60% of participants as "Moderately" or "Very" challenging. Six of these items were in the category of Curriculum and Class Development, and two items were in the category of Learning the Educator Role. Interacting with Students was a relative area of comfort and strength. No significant relationships were found between the level of challenge experienced by OT practitioners transitioning to OTA educators and the demographic factors that were examined. Content analysis of open-ended survey questions yielded additional themes in each of the three categories that offer deeper insights into specific challenges. Collectively, results highlight areas where support and professional development can enhance successful clinician to OTA educator transitions.

Keywords

Faculty transitions, OTA faculty, challenges

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ABSTRACT

There is a transitional process that occurs when an occupational therapy (OT) practitioner assumes the role of an educator. Various challenges have been reported, though few directly address occupational therapy assistant (OTA) education. This study aimed to identify challenges faced by OT practitioners when they transition from working in a clinical setting to working as OTA faculty members. A 29-item online survey was developed covering three key areas of new OTA faculty members' responsibilities: a) Learning the Educator Role, b) Curriculum and Class Development, and c) Interacting with Students. The survey was distributed through the American Occupational Therapy Association Program Directors' and Academic Fieldwork Coordinators' listservs, the Education Special Interest Section listserv and direct email to faculty members. Two hundred twenty-three participants completed the survey. Eight items were rated by 60% of participants as "Moderately" or "Very" challenging. Six of these items were in the category of Curriculum and Class Development, and two items were in the category of Learning the Educator Role. Interacting with Students was a relative area of comfort and strength. No significant relationships were found between the level of challenge experienced by OT practitioners transitioning to OTA educators and the demographic factors that were examined. Content analysis of open-ended survey questions yielded additional themes in each of the three categories that offer deeper insights into specific challenges. Collectively, results highlight areas where support and professional development can enhance successful clinician to OTA educator transitions.

There is a transitional process that occurs when an occupational therapy (OT) practitioner (OT or occupational therapy assistant [OTA]) assumes the role of an educator (Crist, 1999; Mitcham & Gillette, 1999). Various challenges have been reported during this transition, though few directly address occupational therapy

assistant (OTA) education. With an increasing number of OTA programs requiring faculty members (Accreditation and Academic Affairs, 2016) and an overall shortage of OTA and OT faculty members (Ad Hoc Committee- Future of Occupational Therapy Education, 2013), supporting these transitions requires attention. This is critical for building support systems for those who transition, retaining those who make the transition, and improving the quality of OTA student education. New faculty members need to be equipped with the skills necessary to be effective classroom educators (Smith & Boyd, 2012). Identifying specific challenges new faculty members face can inform areas to provide support and professional development.

From 2010-2017 the number of accredited OTA programs in the United States increased 52.5%, from 141 programs to 215 programs (Accreditation and Academic Affairs, 2011; N. Harvison, personal communication, April 4, 2018). In that same seven year period, the number of OTA faculty members increased 82.1% from 630 to 1,147 (Accreditation and Academic Affairs, 2011, 2016). Data from the most recent *Faculty Workforce Survey* (Accreditation and Academic Affairs, 2010) showed that among OTA faculty respondents only 1% were not OTs or OTAs, demonstrating that the majority of OTA faculty come from OT clinical backgrounds.

Occupational therapy education strives to develop relational practitioners who apply evidence-based, occupation-driven, client-centered interventions addressing physical, cognitive, psychosocial, sensory and other performance skills (Accreditation Council for Occupational Therapy Education [ACOTE], 2012; Schaber, 2014). To be effective in teaching OT, educators must have the skills of an entry-level collegiate instructor and knowledge of pedagogical methods, teaching tools, and content that are directly germane to the practice of OT (Schaber, 2014). Assisting new faculty members in developing the pedagogical skills, tools, and resources necessary to be effective educators is critical to developing competent future OTA practitioners (Anderson, 2009; Mitcham & Gillette, 1999).

Challenges experienced by OT faculty members in this transition have been reported in previous studies. These include understanding expectations of the educator and academic roles and adjusting to the nuances of academic life (Crepeau et al., 1999; Fain, 2011). In addition, educators reported lacking confidence (Mitchell, 1985), feeling insecure (Mitcham et al., 2002), experiencing feelings of pressure during the transition (Crist, 1999), reconciling the juxtaposition of expert competency in the clinical setting and novice competency in the academic setting (Nolinske, 1999), and an overall lack of preparation to be an educator (Crist, 1999). There is little published research on OTA faculty member transitions, thus it is unknown if the areas of difficulty facing new OTA faculty members and new OT faculty members are similar. It is important to identify areas of challenge specific to new OTA faculty members to support their needs. Therefore, the purpose of this study was to identify self-reported areas of challenge for OT practitioners when transitioning from a clinical role to an OTA educator role.

Methodology

Study Design
This mixed methods descriptive study utilized an online survey for data collection. To collect quantitative data, OTA educators rated 29 items on a 4-point scale. Each of these items described a skill required for teaching, and the items were organized into three categories. To collect qualitative data, each category was followed by optional open-ended questions for participants to write short responses. Participant demographic information was also collected.

Participants
This study used purposive sampling with participants coming from OTA Program Directors (PD), Academic Fieldwork Coordinators (AFWC) and faculty members during the 2015-2016 academic year. Participants met inclusion criteria if they taught at least two classes during their first year as an educator. The American Occupational Therapy Association's (AOTA) Academic Programs Annual Data Report from 2015-2016 (Accreditation and Academic Affairs, 2016) indicated that during that school year there were 1,109 faculty members in full-time, part-time and adjunct positions in OTA programs.

Participants were recruited using multiple methods. Invitations describing the topic of study and expected length of time to complete the survey were emailed to all OTA PDs for the 2015-2016 academic year. To reach all potential participants, PDs were asked to forward the invitation to all faculty members in their programs, including AFWCs. An additional 338 OTA faculty members' email addresses were found on OTA programs' webpages and email invitations were sent directly to them. Invitations were sent via the OTA PDs' and AFWCs' listservs maintained by AOTA. An invitation was also placed on the Education Special Interest Section listserv. The initial invitations were sent on February 17, 2016 and follow up reminders were sent approximately one month later. Data collection lasted for six weeks.

Data Collection Instrument
A unique survey instrument, *Challenges in Transitioning from Clinician to Educator for Occupational Therapy Assistant Faculty Questionnaire,* was created for the study. The instrument consisted of 29 items organized in three sections: a) Learning the Educator Role, b) Curriculum and Class Development, and c) Interacting with Students. Participants were asked to rate the level of challenge experienced during their first year as a faculty member for each item. The first year was selected as the reference time frame as it encompassed a full academic year during which participants were likely to encounter most educator responsibilities. Challenge was defined as "Difficulty in your job requiring either extra time, effort, resources, cognitive, or emotional energy." Participants selected "Not Challenging at All," "A Little Challenging", "Moderately Challenging", and "Very Challenging" or N/A for questions that did not pertain to their experience.

After each survey section participants were given the prompt, "If you wish, please elaborate on any of your above responses," with space to write a response. To capture challenges that might not have been addressed in the 29 items, a final question, "Are there any other challenges not mentioned that particularly stood out to you during your first year as an OTA educator?" was asked. Ten demographic questions were also included as part of the survey.

The survey was created by the first author following a comprehensive review of the literature. Literature included the scholarly examination of OT education (AOTA, 2014; Schaber, 2014); challenges in transitioning from clinician to educator in allied health (Anderson, 2009; McDonald, 2010; Smith & Boyd, 2012) and OT (Crepeau et al., 1999; Crist, 1999; Mitcham et al., 2002; Nolinske, 1999); skills required for entry-level teaching at the college and university level (Clement, 2010; Cutting & Saks, 2012; Dennick, 2012) and skills specifically required for teaching OT (ACOTE, 2012; Commission on Education, 2009; Fleming-Castaldy & Gillen, 2013; Schaber, 2014). Items were examined for alignment with the AOTA *Standards for Continuing Competence* (Commission on Continuing Competence and Professional Development, 2010) and *Specialized Knowledge and Skills for Occupational Therapy Educators of the Future* (Commission on Education, 2009). The following steps describe the survey development process (Dillman et al., 2014; Gall et al., 2007; Gray, 2009).

The first iteration of the survey instrument was created in Qualtrics (2015) and vetted for content validity (e.g. ability to collect information about challenges faced by clinicians in transitioning from OT practitioners to OT educators) by four nationally recognized, published scholars in the field of OT education and three members of AOTA's Commission on Education. Reviewers read the survey and based on their expertise, offered feedback on individual item framing and content, and overall scope of the survey and construction. The instrument was revised following expert feedback. Individual items were reframed, content was expanded, and survey construction was revised including grouping items into three categories, Learning the Educator Role, Curriculum and Class Development and Interacting with Students. The second version of the survey was piloted through snowball sampling of OTA and OT educators. Forty-two surveys were completed, and participants' responses were analyzed using descriptive statistics. In addition to completing the survey, participants were asked to give feedback on clarity of the items. Participants reported that all items were easily understood. The survey was deemed to have face validity and items differentiated between levels of challenge experienced by participants. Based on the analysis of the pilot survey, no additional changes were made, and this respective version was used as the final version for the study.

Data Analysis
Descriptive statistics were used to analyze quantitative data. For quantitative outcomes, the frequency of ratings for the 29 items were analyzed using SPSS Version 23 (IBM, 2015). The items that 60% of participants rated as "Moderately" or "Very" challenging were reported as items of challenge. Sixty percent was selected as the response

threshold as it indicated that a majority of participants experienced difficulty with the item. Spearman's Rank Correlation was used for analysis of correlations between selected demographic variables and survey items.

Qualitative data from the open-ended questions were examined with methods of conventional content analysis (Hsieh & Shannon, 2005). Open coding was used to construct initial categories of information, axial coding to build relationships between the categories and selective coding to interpret the emerging relationships and develop themes for each survey section. Coding was completed by the lead author and an independent coder (graduate research assistant). Initially, all responses were coded independently by each coder and grouped according to similarity. Next, the researcher and independent coder reviewed their findings for consensus, discussed discrepancies, and agreed upon emerging themes. Responses were re-coded independently; findings were reviewed together and there were no further discrepancies. These steps were taken for the comments in each section, and for the last question, which asked if there were any areas of challenge that were not asked about in the survey.

Results

The survey was conducted online between February 23, 2016 and March 28, 2016. Out of a possible pool of 1,109 participants (Accreditation and Academic Affairs, 2015) 239 surveys were returned. Of the surveys returned, 223 (93.3%) met the criteria for inclusion in the study. Ten surveys were excluded because the participants did not complete the entire survey, and six were excluded because the participant did not teach at least two classes during his or her first year of teaching. The 223 participants relative to the estimated total population of 1,109 allowed results to be reported at the 90% confidence level with a 5% margin of error. Sample demographics are listed in Table 1.

First Year OTA Faculty Member Challenges: Quantitative Survey Data

Eight items were ranked by at least 60% of the sample as "Moderately" or "Very" challenging. The proportion of participants that noted challenges in each of the respective items are reported in Table 2, grouped by sections of the survey. No items from the Interacting with Students section reached the 60% threshold.

Table 1

Demographic Characteristics of Survey Participants (n=233)

Participant Characteristics	N	(%)
Teaching Status		
Full-Time	146	(65.5)
Part-Time	9	(4.0)
Adjunct	68	(30.5)
Years as an OTA Faculty Member		
Less than a year	27	(12.1)
1-2 years	37	(16.6)
3-4 years	50	(22.4)
5-6 years	44	(19.7)
7-10 years	26	(11.7)
More than 10 years	39	(17.5)
Years of Clinical Experience Prior to Transitioning		
1-3 years	14	(6.3)
4-6 years	39	(17.5)
7-10 years	39	(17.5)
11-15 years	47	(21.1)
16-20 years	38	(17.0)
More than 20 years	46	(20.6)
Highest Occupational Therapy Degree Obtained		
Associate Degree	51	(22.9)
Bachelor's Degree	75	(33.6)
Entry Level Master's Degree	45	(20.2)
Post-Professional Master's Degree	37	(16.6)
Entry Level Doctorate Degree	2	(0.9)
Post-Professional Doctorate Degree	13	(5.8)
Previous Educator Experience*		
Fieldwork Level II Supervisor	164	(73.5)
Fieldwork Level I Supervisor	157	(70.4)
OT or OTA Program Guest Lecturer	117	(52.5)
Parent, Family or Group Education Presenter	101	(45.3)
Continuing Education Presenter	80	(35.9)
State OT Conference Speaker	65	(29.2)
Non-OT Conference Speaker	58	(26.0)
AOTA National Conference Speaker	23	(10.3)
Experience as a Presenter, Speaker or Lecturer not listed	119	(53.4)
No Previous Experience	12	(5.4)

* n ≠ 223 as participants could select more than one item

Table 2

Items in Which at Least 60% of Participants Responded "Moderately" or "Very" Challenging

Item #	Question	Moderately Challenging (*n*)	Very Challenging (*n*)	Total Percentage Responding Moderately or Very (*n*)
	Learning the Educator Role			
1.9	Creating a positive work-life balance	58 (26.0%)	82 (36.8%)	140 (62.8%)
1.8	Processing feelings of competency in your previous clinical role versus in your new educator role	92 (41.3%)	46 (20.6%)	138 (61.9%)
	Curriculum and Class Development			
2.2	Selecting the most appropriate and effective instructional technique to meet the goals and objectives of a course	115 (51.6%)	45 (20.2%)	160 (71.8%)
2.1	Developing competency in a wide variety of instructional techniques	111 (49.8%)	48 (21.5%)	159 (70.3%)
2.6	Familiarizing yourself with accreditation standards and the accreditation process as pertains to your class(es)	86 (38.6%)	69 (30.0%)	155 (69.5%)
2.12	Creating grading rubrics, or determining grading criteria, for your class(es) and assignments	84 (37.7%)	65 (29.1%)	149 (67.8%)
2.11	Creating effective assignments, quizzes, student presentation experiences, lab competencies, etc. to assess (grade) student mastery of information	96 (43.0%)	50 (22.4%)	146 (65.4%)
2.3	Familiarizing yourself with and utilizing evidence-based principles from adult education as a foundation for classroom instruction	84 (37.7%)	50 (22.4%)	134 (60.1%)

Factors Affecting Perceived Challenge Faced by First-Year OTA Faculty Members

Relationships between educator characteristics and amount of perceived challenges were examined using Spearman's Rank Correlation Coefficient. Spearman's Rank Correlation Coefficient was selected because of the nonparametric nature of the data and the manner in which the difficulty of challenge was ranked by participants. The associations between three demographic characteristics: a) previous educational experiences (e.g. supervising students in fieldwork, guest lecturing in an OTA or OT program and presenting at conferences), b) type of OT degree earned, and c) years of clinical experience prior to the transition to OTA educator and the amount of challenge experienced by participants were analyzed against the 29 items on the survey. Overall, only 2 weak relationships were found, which were between previous educational experience and a) creating a positive work-life balance (r_s= .13, n = 223, p < .05) and b) creating grading rubrics, or determining grading criteria for your classes and assignments (r_s= -.14, n = 223, p < .05).

First Year OTA Faculty Member Challenges: Open-ended Questions

Learning the Educator Role

In the Learning the Educator Role section, 49 (22.1%) participants provided responses to open-ended questions. Themes that emerged were: (a) a lack of confidence, (b) difficulties in transmitting knowledge, (c) loss and grief associated with the role transition from clinician to educator (d) challenges managing the workload, and (e) the sense that previous education did not prepare them to be educators.

Participants described feeling a lack of confidence. "After being an expert as an OT in the clinical setting, one finds that in academia, my confidence/competence is significantly challenged. . .it has been a lot of hard work and a dedication unsurpassed in the clinical setting." One participant philosophically stated, "in any new role, there is inherently self-doubt and you tend to second guess yourself. Although knowledge about your subject can be solid and well-developed, the difficulties center around being in a new role, with new people, and being able to take negative feedback."

Others spoke of the difficulty in transmitting tacit knowledge, information that is largely learned through experience rather than explicitly taught (Gall et al., 2007, p. 475). "I consider myself an advanced pediatric practitioner. . .but learning how to convey the information to a student successfully was quite a challenge. So much tacit knowledge that had to be analyzed and fragmented into 'bite sized' pieces."

Participants shared feelings of loss and grief, which were associated with no longer having patient contact and the perception that students were not as grateful and appreciative to the participants as educators as patients had been when they were clinicians. "One major learning point I encountered was the adjustment to not feeling appreciated/respected the same way as I did by my patients as a direct clinician/consultant with years of experience. . .I never realized how much I would 'grieve' my clinical role when I transitioned to teaching." "I felt like I was a good clinician but didn't expect the challenge of adjusting to the classroom environment. My greatest

area of struggle was student's [sic] lack of gratitude. I enjoyed the relationships with patients and the satisfaction of helping another. Adjusting to teaching for me, resulted in a lack of satisfaction during that first year."

Participants also described difficulties in managing workload and the resulting effects on work-life balance. "The first semester teaching, I had to take home work most nights and weekends due to heavy course-load. That was horrible for my mental health." "The amount of time to create lectures, handouts, testing, projects and grading rubrics was extremely time consuming. Finding a balance with personal and work life took several years."

Finally, participants related that the education they received to be a clinician, and the experience of having been a clinician, does not fully prepare one to be an educator. "Being an OT and having an OT education does not provide the educational background to teach. The biggest challenge is to learn how to educate the expertise knowledge I have gained in the last 20 years." Another participant stated, "I was teaching myself how to teach and manage the additional tasks in the role of educator."

Curriculum and Class Development
Four themes from participant responses (*n*=39, 17.5%) to the open-ended questions in this group of items emerged: (a) the desire to make curriculum meaningful and comprehensive, (b) little direction for curriculum and class development, (c) addressing ACOTE standards, and (d) creating exam and test questions.

In discussing the desire to make curriculum meaningful and comprehensive one participant stated, "I think my biggest challenge when teaching my first class was that I felt as a working OTA there was so much to teach, and that there wasn't enough time to get all the information covered. . .walking out of a classroom and wondering, did I miss anything?" Developing curriculum and teaching methods that incorporated active learning was also mentioned. "Standing up and lecturing isn't the way to present information to these students. They expect hands on and interactive ways of teaching. It challenged me to become creative in my thinking and required many extra hours outside of class."

Little direction and support for curriculum and class development was described. "I was 'thrown in' with 'here's the textbook we are using your first class starts in 3 days'. I did not even know how to put together a syllabus!" Another stated, "I was astonished at how little support I was given in creating and developing course materials. Even though I knew the material had been presented before, there was little information provided to me, and the information I received was poorly organized and difficult to relate to other content." Addressing ACOTE standards through curriculum was another area of challenge reported. "Learning the standards for ACOTE and what is acceptable criteria to meet those standards was and still is difficult at best."

Finally, respondents specifically mentioned difficulty with methods of evaluation such as creating exam questions and determining grading criteria. "For me, creating tests and

assignments was the most challenging---i.e. how many quizzes make sense? Format of exams—multiple choice vs essay?" One participant found that experience as an OT practitioner created challenges when assessing students. "I found that I would have a tendency to 'downgrade' and 'upgrade' to find the 'just right challenge' in regard to testing, particularly in skills exams." The importance of creating suitable exams tied to course objectives was addressed by one participant. "One specific area that is very challenging is the construction of appropriate exam testing questions for midterm exams, finals, or other tests that are appropriate for the level of thinking intended by the course objectives. . .inappropriate testing leads to inaccurate assessment of learning outcomes and creates negativity with the students."

Woven throughout participants' comments was an overarching theme of time management challenges. Stated one participant, "All I had to work with were syllabi for each of my courses. The amount of time to create lectures, handouts, testing, projects and grading rubrics was extremely time consuming." The volume of work needed to create curriculum for a class and its relation to the time required from the participant was also repeatedly mentioned. Participants also addressed the time management challenges of needing to create class content and teach concurrently. "In my program we were instructed to create the course materials with only a few weeks to do so. Therefore, we mostly created the course as we went along." One participant encapsulated the challenge of creating curriculum and its relationship to time with this perspective, "I feel like lack of time is the issue that impacts all of the above questions/issues the most. There is a lot of info on the web and in books on developing best practices in education—a person just has to have time and take time to look into these and then take the leap (and take time) to put them into practice."

Interacting with Students
There were no items under the Interacting with Students section where at least 60% of participants responded with Moderately or Very challenging, however there were 32 (14.3%) open-ended responses. Two areas of challenge were identified: (a) difficulties of failing students, and (b) managing and teaching professional behaviors in the classroom.

Two perspectives emerged relating to challenges faced when failing students. "I also had to fail two students in two different classes, which was more difficult than firing an employee and I did not receive much support or assistance from leadership in the educational institution." Another perspective focused on the intrapersonal difficulties when failing a student, "It is emotionally draining to deal with students that are failing – they oftentimes leave jobs, put family responsibilities on the back burner, etc. to get through this program and it is difficult, emotionally, when they are not successful."

The second theme concerned respectful, professional behavior from students in the classroom. Some respondents directly addressed the topic of professionalism. "I find that there is a big need to model and teach professional behavior, which wasn't overly challenging, but I was surprised by this need. . .my expectations were higher than what I experienced." Others wrote about behavior students exhibited that they viewed as

unprofessional. "Dealing with [some] students' [behavior] was also a huge challenge—those who challenge your position and challenge every point taken off on assignments or exams…I had two students who I can still recall who were quite confrontational." Several respondents expressed surprise that this was an area of challenge. "I really have felt this first year that the…professionalism of the OTA students at my program seems surprisingly low- I was not prepared for this."

Additional Challenges
Participants identified three additional areas of challenge not addressed in the survey in the responses to the final question: (a) challenges working with educational technology, (b) the need for mentorship, and (c) the need for orientation to the teaching role. Participants discussed challenges in two primary areas of technology: learning how to use technology and preparing for technological difficulties. "Learning how to use instructional technology that I was not familiar with (i.e. Blackboard) [was difficult]. Every year it seems I have to learn and master some sort of instructional technology to be efficient in teaching and meet expectations of the college."

Participants also cited the need for more mentorship and/or help from faculty members with more experience. "My PD had little time to mentor me but did try. . .I really could have used a solid mentor to discuss issues and receive advice." The benefits of having a mentor were mentioned by multiple participants. For example, "Our college has a first-year mentoring program with teaching methods presented that reflect the mission of the college. This was very helpful."

The final theme that emerged was orienting and onboarding new faculty members to the educational role. Said one participant, a "lack of formal orientation process. . .led me to find my own resources in some aspects." This increased the level of challenge for one participant, expressed as "orientation to MANY of the OTA Department's way of doing things was not shared upfront and then when something needed to be done or 'happen' it was asked in a 'hurried' also '911' manner."

Discussion
Results from this national survey highlight challenges encountered by new OTA educators. Findings revealed specific teaching responsibilities, role requirements and professional development needs requiring support, particularly those experienced early in this transition. Overall, clinicians transitioning to the role of OTA educators faced multiple challenges and felt underprepared. Yet, strengths were noted with their interpersonal capacity to interact effectively with students. Study findings provide guidance to strengthen educator preparation and support for OT clinicians making this transition.

This study fills several gaps in the literature. Much of the existing published literature comes from older, smaller, qualitative studies (Crepeau et al., 1999; Mitcham & Gillette, 1999; Mitchell, 1985) whereas the data from this study were collected in a nationwide sample and included mixed methods. Also, the vast majority of published studies focus on OT education rather than OTA education. Finally, much of the published literature

specifically addressing challenges in the transition from clinician to educator comes from nursing literature (Anderson, 2009; Smith & Boyd, 2012).

The most challenges were identified with Curriculum and Class Development activities. Specifically, difficulties with time management, selecting meaningful and comprehensive teaching methods, creating curriculum with little direction, developing a wide variety of instructional techniques, addressing ACOTE standards, and designing meaningful assessments of student progress were noted. Challenges were also identified with Learning the Educator Role, particularly in creating a work-life balance and processing feelings of decreased competency as an educator versus a clinician.

As a whole, results align with previous findings that indicate OT practice, even with expert competency in the clinic, does not effectively prepare one to be an educator (Crepeau et al., 1999; Crist, 1999) nor lead to competency in an academic setting (Nolinske, 1999). While results and participant comments echo previous findings that educating future OT practitioners requires a different set of skills (Crepeau et al., 1999; Crist, 1999) than those developed in OT clinicians, this study uniquely highlights and quantifies experiences to illustrate where new OTA educators need support.

The 2018 ACOTE standards require that faculty members possess "The expertise necessary to ensure appropriate curriculum design, content delivery, and program evaluation" (ACOTE, 2018, p. 12). Study results clearly indicate that those transitioning from clinician to educator require assistance from their educational institution to meet this standard. Understanding how OTA programs support this objective in their curricula and prepare clinicians who are interested in academic teaching is an important area of future research.

The results also highlight specific areas and skills that educational institutions can support through faculty development. Mentoring was specifically mentioned as helpful by some survey participants. Mentoring models and strategies that support new faculty such as the Education Special Interest Section Mentorship Program are available (Simon et al., 2019). Mentoring can help new educators transition to new roles, gain knowledge of and reflect on teaching and learning strategies, as well as feel more comfortable shifting from a clinically-oriented identity and responsibilities to that of an educator. Understanding different faculty development models and approaches that support new faculty can strengthen preparation and feelings of competency to create more successful transitions. Ongoing faculty support and development can also assist with faculty recruitment and retention.

As the area with the most challenges reported, Curriculum and Class Development activities warrant closer consideration. Specifically, participants remarked on workload and the sheer amount of time required in their new roles. Time was needed to generate quality content and evaluation instruments for classes, to gain familiarity with ACOTE Standards, to study various types of instructional methods, and to learn skills related to curriculum and class development. In the OT literature, Crist (1999) reported similar findings among new educators regarding time and workload, as did Dempsey (2007),

Siler and Kleiner (2001), and Smith and Boyd (2012) in allied health literature. In this study, a lack of time for orientation to the teaching role was also repeatedly cited. New educators may benefit from educational institutions and OTA Program Directors' realistic appraisal of the time new faculty members need to engage in all levels of curriculum and pedagogical development in their consideration of workloads.

Finally, this study highlighted some consistent areas in which new educators struggled and subsequently could be supported by post-professional and continuing education resources. Currently AOTA offers the Academic Leadership Institute, and a four-part online continuing education course in higher education. Expanding professional development options, such as a workshop similar to the 15-contact hour AOTA Fieldwork Educator Certificate program but targeted for instructors in higher education might be very helpful. This may also help address faculty workforce shortages by encouraging clinicians to explore faculty roles and learn teaching skills. OT practitioners who wish to transition but find themselves unprepared or unsupported to become educators may also benefit. Occupational therapy doctorate programs should also consider the identified areas of challenge when designing courses for future educators.

Strengths and Limitations
Study strengths include the comprehensive nature of the survey items, systematic survey development, and the large, national sample. The items on the survey covered a wide range of skills required of new OTA educators. The instrument was developed after a thorough literature review and input from multiple experts in OT and OTA education. Further, it was piloted to ensure clarity for participants. Finally, the data was collected from a large sample, 223 OTA educators, encompassing full time, part time and adjunct faculty members with a variety of years of clinical experience and time worked in education.

Limitations of the study included potential participant bias and the pool from which participants were drawn. As a survey, there is the potential of voluntary response bias and recall bias. Although the survey results from the data mirrored trends found in the literature, much of the information in the previous literature came from smaller qualitative studies, from studies of OT faculty members, and from literature from allied health professions. Therefore, caution is in order when comparing results. Participants were drawn from currently active OTA faculty members. For this reason, faculty who had transitioned from clinician to educator and then left education were not represented in the sample. Data from former faculty members might further clarify the challenges faced by OT practitioners when transitioning from a clinical role to an educational role. Finally, all results must be interpreted with caution because responses may reflect experiences and perceptions of faculty members who were experiencing more challenges.

Implications for Occupational Therapy Education
Quality OT education is foundational for developing competent OT professionals (Anderson, 2009; Mitcham & Gillette, 1999). Training and retaining occupational therapy educators are vital for the health of the profession (Harvison, 2012). The areas of noted

challenge found in this survey help to identify possible solutions to strengthen the OTA workforce. New faculty members may benefit from more support to learn the skills needed for successful curriculum and class development, more on-the-clock time for curriculum and class development and assistance in ensuring that curriculum addresses ACOTE standards. A greater awareness of potential challenges facing new OTA faculty members by those considering a transition to OTA educational roles may also help by decreasing some of the surprise when challenges arise during role transition.

Conclusion

The challenge of recruiting and retaining qualified OT and OTA educators is well known (Ad Hoc Committee-Future of Occupational Therapy Education, 2013; Harvison, 2012). Educators are vital for the health of the profession as effectively educating future OTA practitioners is foundational for creating a strong workforce (Commission on Education, 2019). The areas of challenge that were reported in this study lend insights into possible solutions to strengthen educator preparation and the OTA workforce. By identifying and quantifying the amount of challenge various skills required of new educators present, this study offers a unique contribution to the scholarship of teaching and learning. From these results, educational institutions can create or enhance formal and informal supports to aide those who transition. New educators can also advocate for these supports. Additionally, as a preliminary study, the findings reveal issues that could be examined or expanded in future research endeavors.

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