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# The Occupational Therapy Examination and Practice Preparation (OTepp) Program: Development, Implementation and Evaluation of an Educational Program for Internationally-Educated Occupational Therapists

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# The Occupational Therapy Examination and Practice Preparation (OTepp) Program: Development, Implementation and Evaluation of an Educational Program for Internationally-Educated Occupational Therapists

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This paper provides a chronological overview of the development, implementation, and evaluation of an educational initiative aimed at ensuring internationally-educated occupational therapists are prepared to enter practice in their new country, Canada. The three major phases of the program's 12-year evolution are described, to distill the key lessons learned at each phase. Data related to the demographics of participants, program content, results of the national examination, registration, and employment outcomes are included. An enhanced understanding of the transition experience of internationally educated occupational therapists provides a strong foundation from which to support internationally-educated colleagues and strengthen the occupational therapy profession.

#### Keywords

Occupational therapy, foreign professional personnel, employment, professional practice

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Program: Development, Implementation and Evaluation of an Educational
Program for Internationally-Educated Occupational Therapists

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#### **ABSTRACT**

This paper provides a chronological overview of the development, implementation, and evaluation of an educational initiative aimed at ensuring internationally-educated occupational therapists are prepared to enter practice in their new country, Canada. The three major phases of the program's 12-year evolution are described, to distill the key lessons learned at each phase. Data related to the demographics of participants, program content, results of the national examination, registration, and employment outcomes are included. An enhanced understanding of the transition experience of internationally educated occupational therapists provides a strong foundation from which to support internationally-educated colleagues and strengthen the occupational therapy profession.

Around the twenty-first century, the global rate of migration increased markedly to address projected workforce shortages and Canadian immigration was a central component within this pattern over the first decade (Camarota, 2011). Issues related to health professionals' ability to enter their professions once achieving entry to Canada were beginning to emerge, and more than apparent from only a cursory view of the political and health care systems (Covell et al., 2016; Hawthorne, 2008). Regulatory legislation had been passed over the preceding two decades that structured the practice of many health professional groups. Consequently, the identification of barriers to integrating and acculturating to Canadian society and the workplace became a critical

priority. Immigrating to Canada was the first step of the process but the complexities of being enabled to enter one's profession upon arrival was a confusing and overwhelming proposition (Ontario Regulators for Access, 2004b). Many government agencies as well as non-governmental organizations established partnerships leading to initiatives, reports, research studies, and evaluation profiles with the goal to understand this significant problem and ameliorate the challenges through targeted strategies and projects (Alboim et al., 2005; Alboim & The Maytree Foundation, 2002; Ontario Ministry of Citizenship & Immigration, 2006).

At a local level in the early 2000s, against the backdrop of this international maelstrom of human movement, individual internationally-educated occupational therapists (IEOTs) began to contact the occupational therapy program at McMaster University in Ontario, Canada to ask about the possibility of taking courses. They wanted help to prepare for the national certification exam, a requirement for their transition to Canadian practice, as there were no established supports at that time for IEOTs. The first author and Associate Dean at the time launched an exam preparation initiative to help meet this need. IEOTs engaged in a "snowball" approach to notify other IEOTs about this learning support. An occupational therapist from the community organized resources and developed client scenarios representing key populations who typically receive occupational therapy services. This therapist facilitated small group discussions in community settings, such as library meeting rooms and church spaces, to enable accessibility for the IEOTs. The discussions were aimed at analyzing and synthesizing knowledge to determine relevant occupational therapy plans for each scenario. As IEOTs uncovered learning resources, these materials were collected and a repository was established for use by the current and future study groups. Over the years, this initiative evolved and changed as a result of different facilitators, the development of more learning resources, and the delivery of this support over a conference telephone line. This enabled more IEOTs in further geographic locations to access the learning opportunity. While formal data collection did not occur, IEOTs reported appreciation for this support because it provided a means to prepare for the national certification exam and a social network to connect with other IEOTs.

In 2006, the provincial Ministry of Health launched a short-term funding call for mentoring projects intended to exemplify ways of supporting internationally-educated health professionals by partnering with established and experienced practitioners and creating networks for professional growth and cultural integration. A research team was awarded this funding to launch the Supporting (Re)Entry to Professional Practice (SEPP) project (Baptiste et al., 2010). The SEPP project developed and evaluated a mentoring model, using on-line and in-person meetings to enhance professional knowledge and nurture growing mentoring relationships. Many participants were involved in supervised placement opportunities arranged by SEPP, in order to address their specific practice learning needs. Internationally-educated physiotherapists and occupational therapists engaged in this program and were paired with mentors from their profession. In their feedback, participants suggested development of a formal education program including field-based learning and mentorship opportunities. These recommendations were the inspiration for the creation of Canada's first certificate

program for IEOTs: The Occupational Therapy Examination and Practice Preparation (OTepp) program. The purpose of this paper is to: 1) provide a detailed description of the development, implementation and evaluation of the OTepp program across three phases, and 2) distill the key lessons learned at each phase, thereby enabling others to consider them in their own context, as appropriate. Figure 1 illustrates the 12-year evolution of the program through a timeline of the three major phases.

Phase 1: 2008-2010
The Occupational
Therapy Examination
Preparation Project
(OTepp)

Phase 2: 2010-2013
Additional Funding for
OTepp Expansion
Funded Model

Figure 1. OTepp program timeline.

### 2008-2010: Phase 1 – The Occupational Therapy Examination Preparation Project (OTepp)

Although the SEPP program included both IEOTs and internationally-educated physiotherapists, OTepp was designed solely for occupational therapists because a similar re-entry program was emerging during this period for internationally-educated physiotherapists at another university. OTepp was designed to support IEOTs in their transition to Canadian practice through a university and field-based curriculum that illustrated the knowledge, skills, and behaviors required to practice occupational therapy in Canada. The provincial government provided funding to enable two cohorts of IEOTs to participate in OTepp, one in 2008 and the other in 2009.

#### **Program Development and Implementation**

OTepp participants were required to meet eligibility requirements for the national certification exam and language requirements for the regulatory organization, in order to participate. The education program was offered at no cost during the funded period. Completion of all eight courses (see Appendix A) led to a certificate issued by the School of Rehabilitation Science. Classes were held in-person at McMaster University with slides and resources posted on an electronic learning platform.

OTepp team members included the principal investigator, project coordinator, curriculum lead, two research assistants, and a resource assistant. Team members worked together to develop the curriculum, teach the classes, and grade assignments in order to understand how the curriculum was being received. To provide each participant with individual support, team members had a roster of advisees, or participants, to discuss their unique circumstances. This role included completion of an initial intake interview to better understand the IEOTs' needs and begin orientation to OTepp and Canadian practice. In addition to the research team, a project advisory committee was

established to provide project oversight and feedback. The advisory committee also assisted with practical issues such as raising awareness of OTepp among IEOTs. Advisory team members included representatives from the following stakeholder groups: IEOTs, leadership from professional and regulatory organizations, and employers / prospective field-based learning sites.

OTepp was recognized by the regulatory organization, through their agreement to apply OTepp class hours towards currency hours for participants who required them to be eligible for registration with the regulatory organization. Prior to OTepp, many IEOTs struggled with the transition to practice because they required currency hours but did not have the professional network or needed insurance to arrange a placement opportunity where these hours could be earned (Baptiste et al., 2010).

OTepp received approval from the Senate of McMaster University for undergraduate certificate program status (Baptiste & McMahon, 2013). This led to OTepp participants having access to insurance, similar to student occupational therapists, that is required for field-based learning in two courses of the program. Several employers agreed to accept participants for the field-based learning opportunities but fewer than was hoped; these opportunities were already challenging to secure for student occupational therapists from local occupational therapy programs (Council of Ontario Universities, 2013). To address the strain on field-based learning sites, the team worked with colleagues to identify the differences between supervising a student occupational therapist versus an IEOT on placement, in the hopes that these differences would appeal to a range of supervisors in unique work situations. These differences included the IEOT having previous practice experiences in their home country and their exposure to different professional roles such as manager, educator, and/or administrator. Additionally, these field-based learning opportunities for OTepp participants were scheduled during times of the year when local student occupational therapists would be engaged in university-based courses.

#### **Program Outcomes**

The project was reviewed and approved by the McMaster University Research Ethics Board (#08-190). A total of 76 participants enrolled in the program during the two years. Sixty-six percent (n = 50) of these participants were 11 or more years post-graduation, 66% (n = 50) were not educated in North America or Europe, 80% (n = 61) had written the national certification exam less than three times, 73% (n = 55) did not have a provisional license, and 75% (n = 57) did not speak English as a first language. Most participants resided in the local area although there were some participants from across the province who were able to access resources through the online learning platform only. There was considerable interest from out of province and offshore IEOTs, who did not join the program due to provincial funding restrictions.

Registration was higher than expected, but attrition was also high. Fifty-nine percent (n = 45) of IEOTs did not complete the program for various reasons including an inability to meet the academic standards, and as a result of challenges in finding time for study, such as balancing other familial and work demands. Other reasons for attrition were

unknown to the investigators due to difficulty following up with participants (Dhillon et al., 2019). Participants who were unsuccessful in completing OTepp reported no other program or support to assist them in their transition. Participants who were successful in the program identified ongoing learning needs related to resume writing, interviewing for employment, and cultural awareness. These skills for obtaining and maintaining employment were a high priority for some participants. Findings pointed towards the need for additional support options to assist IEOTs with their transition to practice.

The number of participants joining the online platform only increased in the second cohort. However, the learning experience online was not nearly as rich as face-to-face. IEOTs received resources but missed the in-class discussion that enhanced participants' ability to process the learning from the resources. The learning platform used with the first cohort was static and did not allow for any interaction beyond posting questions and comments asynchronously. Thus, participants in the second cohort were provided with the option of joining class discussion via teleconference.

The outcomes of interest in OTepp included passing the national certification exam, registering with the regulatory organization, and obtaining employment as an occupational therapist. When the first and second cohort data were combined, 29% (n = 22) of participants passed the national exam; 18% (n = 14) registered with their respective regulatory organization; and 14% (n = 11) had obtained employment within one year of completing OTepp. However, as mentioned previously, follow-up with participants was challenging and as a result, data was missing for many IEOTs who registered for these cohorts. IEOTs changed their location relatively often, thus also changing contact details. Despite asking graduates to stay in touch with the program, after OTepp moved from research study to university certificate program, there was no way to expect to receive that information due to confidentiality legislation.

Of those who were known to have passed the exam, the attribute most strongly associated with passing the exam was being educated in a country in either North America, Europe, or Australasia (contingency coefficient = 0.49, p < 0.01). Other associated attributes that were statistically significant but less strongly associated with passing the exam were speaking English as a first language (contingency coefficient = 0.36, p = 0.02), and not requiring currency hours with the regulatory organization (contingency coefficient = 0.44, p = 0.02). These findings are consistent with qualitative data indicating that participants who were most similar to Canadian occupational therapists in their practice, education, and health contexts, were most successful at their transition to occupational therapy practice in Canada (Dhillon et al., 2019). In these countries, the occupational therapy education and practice prioritizes collaboration, self-directed learning, and evidence-based and client-centered practice.

Many OTepp participants, particularly from Middle Eastern and Asian countries, reported learning more than they had originally anticipated. One participant noted, "...being an internationally educated OT, there is really a big difference of practice back

home and here in Canada. So like an eye opener. And not just that, [OTepp] gave me a lot of knowledge and foundation about Canadian occupational therapy practice" [Participant 1007248].

In general, IEOTs anticipated that their learning gap was small, related to the national certification exam only and would be met by OTepp; however, by attending classes and completing assignments in the certificate program, they realized that their gap was much larger than simply passing the exam and had to do with practice more broadly (Dhillon et al., 2019). The research team reflected on the dissonance between the title of the certificate, which focused on exam preparation and the philosophy of the curriculum, which was exam *and* practice preparation and determined that a more transparent title was needed to reflect the purpose of the OTepp curriculum. See Table 1 for a summary of the key concepts learned during Phase 1.

#### Table 1

#### Key Learning from Phase I

- Development of additional modules was needed to support those who were unsuccessful as well as those who were successful and required additional skills for employability.
- Development of online support was essential as in-person learning was not always possible.
- Renaming the "Occupational Therapy Exam and Practice Preparation" Program (OTepp Program) to reflect the goal of preparing participants for practice in the local context rather than simply the national certification exam.

#### 2010-2013: Phase 2 – Additional Funding for OTepp Expansion

In late 2009, the team partnered with the national occupational therapy association to apply for and receive federal funding to enable IEOTs across the country to join OTepp. Simultaneously, provincial funding was renewed. This enabled the program to expand and provide IEOTs with more tools and supports needed to successfully transition to Canadian occupational therapy practice from the years of 2010 through 2013.

#### **Program Development and Implementation**

During this time, OTepp began to play a more significant role on the national occupational therapy stage. Team members were involved in completing the action plan for the assessment and recognition of foreign qualifications as outlined in the Pan-Canadian Framework (Forum of Labour Market Ministers, 2009). To ensure representation within these types of initiatives, the project team also expanded and integrated the national and provincial projects with shared staff (see Figure 2). In addition to the Ontario advisory committee, a national advisory committee was established to provide consultation on issues across the country. The committees included representatives from regulatory organizations, fieldwork coordinators, employers, and IEOTs.

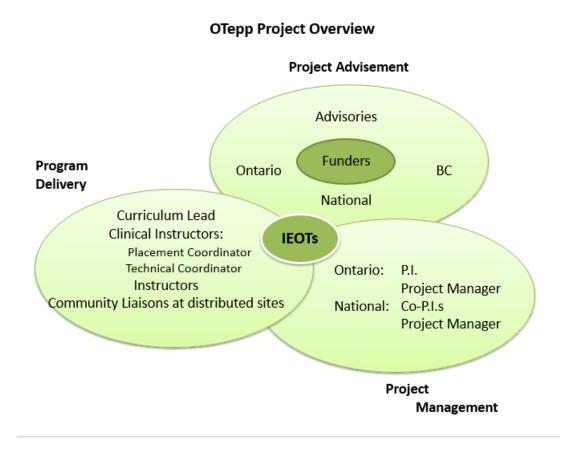


Figure 2. OTepp project overview.

As part of the registration process, IEOTs participated in a needs assessment intake interview to determine which, if any, of the newly designed and redesigned OTepp modules (see Appendix B) were suitable for their knowledge, skill, and experience levels. To assist participants living outside of commuting distance, OTepp invested in a web-conferencing tool designed for educational institutions to enable participants to attend classes virtually and synchronously. Web conferencing allowed a more inclusive experience. Classes were also recorded and archived using a free and open-source online learning management system. Thus, class materials, resources and recordings were accessible to participants at any time.

To facilitate the early delivery of accurate and accessible information to IEOTs in their transition, OTepp launched a new website in English and French. The website provided module and registration information, project news and events, and professional, educational, settlement, financial, and immigration resources, as well as links to regulatory organizations and professional associations. OTepp also produced "Day in the Life" videos that illustrated the work of Canadian occupational therapists in diverse practice settings (Canadian Association of Occupational Therapists [CAOT], 2016). The videos were created to inform IEOTs about the day-to-day activities of occupational therapists in Canada.

Early in the project, the team recognized the importance of building relationships with stakeholders, thus leveraging resources and understanding the professional, regulatory, and cultural landscape. OTepp formed partnerships with universities across the country that were situated in the provinces with the largest numbers of IEOTs (Canadian Institute for Health Information [CIHI], 2017). Because the occupational therapy regulatory and employment landscape differed from province to province, these partnerships were invaluable in increasing awareness of the unique needs of IEOTs across Canada. Collaboration with colleagues in these distributed sites differed according to the particular geographical area. For instance, in a French-speaking area of the country, curriculum was translated into French and preparations were made to run a cohort in French. Fieldwork coordinators at various universities facilitated field-based learning opportunities for OTepp IEOTs and informed the project about employer and practice environments in their respective provinces.

British Columbia (BC) is the province with the second largest number of IEOTs in Canada, after Ontario (CIHI, 2017). The largest university in this province piloted two offerings of the core curriculum in person in 2010. However, the team deemed consistency in evaluation and assessment essential, so from 2011 onward all classes were delivered by the team in Ontario. At the same time, personal connection with IEOTs was important to maintain, so two community liaisons / occupational therapists from BC continued to serve in an advisory role and to find field-based learning opportunities for local IEOTs. Weekly meetings involving the national project team and BC team facilitated communication and collaboration.

The OTepp team responded to learning needs as they arose. Employers reported the need to better understand the challenges experienced by IEOTs. The team created resources both online and in workshops. In addition, it became clear that processes and requirements for transition to practice differed from province to province. OTepp undertook a study to identify barriers to and inconsistencies in accessing field-based learning and developed a plan to help IEOTs. OTepp coordinated a project that built a bilingual lexicon of 332 occupational therapy terms so that the profession could have a common understanding of profession-specific terms in French and English. OTepp also developed the McMaster Assessment of Comprehension and Communication (MACC). This scenario-based tool was designed to address deficiencies in current English proficiency assessments in determining IEOTs' comprehension and communication of occupational therapy concepts used in Canadian practice (Nguyen et al., 2014).

#### **Program Outcomes**

Enrollment was consistent throughout the four-year funding period and the outcomes for participants who completed modules were encouraging. A total of 411 participants enrolled in OTepp modules between 2010 and 2013. Sixty-two percent (n = 255) passed the national certification exam, 63% (n = 259) obtained licensure, and 35% (n = 144) obtained employment as an occupational therapist. The results were even more encouraging for participants who specifically completed the Core Curriculum module, formerly known as the OTepp curriculum described in Phase 1. One hundred thirty-seven participants enrolled in the Core Curriculum module and 92% (n = 126) of these

participants passed the national certification exam, 82% (n = 112) gained licensure, and 75% (n = 103) obtained employment. However, many participants enrolled in both the Exam Preparation module and the Core Curriculum module; thus extrapolating outcomes from these modules, independent of each other, was not possible.

Participants expressed their appreciation for the program offerings. Participant 1211045 passed the exam, became registered with the regulatory organization, and found employment as an occupational therapist in 2013 following completion of both the Exam Preparation and Core Curriculum modules. She stated:

"I hope you continue and expand this program in future...I felt the exam does not test what the candidates know but how they actually think, and in order to be successful in such an exam many of the foreign educated OTs need to make a great paradigm shift." [Participant 1211045]

Building on key lessons learned in Phase 1 of the project, the team recognized that IEOTs required more than the Core Curriculum module to be successful. Individualized supports and information, flexible delivery options, varied resources, and collaboration with stakeholders such as occupational therapy regulatory organizations and employers are essential to a successful educational program. See Table 2 for a summary of the key concepts learned during Phase 2.

#### Table 2

#### Key Learning from Phase 2

- Early and accurate dissemination of information facilitates transition to occupational therapy practice by providing security and clarity.
- Technology can facilitate individuals' access to resources and foster a sense of community that transcends geographical barriers.
- A targeted curriculum with both university-based and field-based learning, in combination with exam preparation support, increases success rates.

#### 2013 - Present: Phase 3 - Transition to a Self-Funded Model

By 2013, OTepp was meeting the knowledge and skill development needs of IEOTs. In this final phase, the content of the modules was relatively stable with only minor updating required to ensure the most current and relevant information was being shared with IEOTs. From OTepp's formal beginning, sustainability planning had been an issue and became a priority in this final phase. There were no obvious resources to access to establish sustainability, and a scan of available funding across the country yielded very few options. This was problematic because many IEOTs reported limited financial resources upon arrival in Canada.

#### **Program Development and Implementation**

With the end of government funding and limited money remaining in the budget, the team requested an unfunded extension from the provincial government to explore the feasibility of a partial tuition model. Starting with the 2013 cohort, 15 participants paid

\$1,000 CAD for the Core Curriculum module and 5 participants paid \$300 CAD for an individual course within this module, providing a base for a more stable sustainability plan. Previously, IEOTs were required to take all courses within the Core Curriculum module. The non-certificate modules including Exam Preparation, Mentorship, and Work Readiness were endowed to the CAOT for delivery to broader populations, such as re-entry occupational therapists and new domestic graduates, on a fee for service basis. OTepp then, could concentrate on the Core Curriculum, which was focused on academic learning and best suited for delivery by a post-secondary institution.

The unfunded extension allowed OTepp to begin transitioning from a project to a program, and the focus shifted to administrative issues and laying the groundwork for a full tuition model. Because most of the team had moved on to other opportunities, remaining team members had to embrace new skills, roles, and responsibilities. OTepp as a small and nimble program had to fit into the organizational structure of a large university. McMaster University provided physical space and some administrative support including the Office of the Registrar and Student Services and Accounts. OTepp, as an independent revenue generating program, had responsibility for supporting itself financially.

The current and previous team met with various university departments and representatives for advice and a commitment of support. Following a detailed budget development process including selection of a cost recovery model, tuition was set at \$8,795 CAD for the full certificate program or \$2,500 CAD for individual courses in 2017. Current rates remain the same. Sustainability was achievable if a minimum of seven participants enrolled in the full certificate program.

Through pre-existing and developing partnerships, OTepp participants accessed financial supports such as bursaries and loans specific to internationally-educated health professionals. Often, these opportunities required internationally-educated health professionals to be located within a specific geographic area and/or meet eligibility criteria based on financial need and enrolment in specific types of educational programs. IEOTs received assistance anywhere from \$5000 to \$10,000 CAD through these sources. When IEOTs found other regional financial resources independently, OTepp provided confirmation of registration and letters of support and began compiling these resources for future participants.

#### **Program Outcomes**

The first year of the partial tuition model was a success in that adequate numbers for sustainability were reached. Also, OTepp became more firmly entrenched by being recognized as a formal program offering at McMaster University. However, it was evident that IEOTs struggled to pay tuition fees:

"...it has been really hard to be a full-time student to study for me, as a mother of two children and a single mother, because of a financial difficulty...It is significant for me to take this course to achieve my dream." [Participant 1111025]

"I got a bursary for the license exam from an [English as a Second Language] school. All the textbooks were too expensive for me and other information was limited. It was difficult to prepare for the exam... This program will be beneficial for internationally trained occupational therapists who are struggling to go back their professional field. Without the government support, we would not be able to join this program with the common financial difficulties we have." [Participant 1111025]

Recent years have yielded encouraging participant enrollment and outcomes. Between the years of 2014 - 2019, 67 IEOTs enrolled in the program courses. Of those, 52% (n = 35) passed the national certification exam. Fifty-two percent (n = 35) of the IEOTs obtained licensure, and 43% (n = 29) were employed. However, capturing accurate and complete outcome data has become even more challenging after OTepp transitioned from a research project to educational program.

The new mandatory Substantial Equivalency Assessment System (SEAS; Association of Canadian Occupational Therapy Regulatory Organizations [ACOTRO], 2019) was introduced in May 2015, thereby changing the process and timing of registration. All IEOTs seeking registration to practice in Canada must participate in the SEAS process. Applicants who are deemed to have gaps are referred to the OTepp program for individual courses or the entire program, as needed. Upon successful completion of the courses or program, the regulatory organization will give the applicant eligibility to proceed to the next step, typically to write the certification exam. OTepp is continuing to work closely with the regulatory organizations to address identified professional knowledge gaps. See Table 3 for a summary of key concepts learned during Phase 3.

#### Table 3

#### Key Learning from Phase 3

- Strategic partnerships are essential for sustainability planning (e.g. universities, community agencies and regulatory organizations).
- Assisting participants in securing funding opportunities (e.g. bursaries and low interest loans) for educational purposes is essential for IEOTs' participation in educational programs.
- Programs need to be nimble and responsive to meet the continually evolving needs of IEOTs and the policies that affect their transition to practice.

#### **Discussion**

While OTepp changed considerably in its evolution with respect to the type and range of supports and deliverables, the essence of the program remained the same. It was underpinned by a mission to build a strong occupational therapy workforce in Canada in which colleagues supported one another in their service to society. The term "bridging program" is often used to describe the type of educational program OTepp offered. However, this term has become problematic in that it positions internationally-educated colleagues as inferior to domestic colleagues and therefore, requiring "upgrading" to

practice in their new context (Lum, 2006; Neiterman & Bourgeault, 2015). This mentality serves to divide the profession, rather than unite it. The emphasis in OTepp has been interdependence among colleagues, to draw and provide support to and for one another.

Another essential element throughout OTepp's evolution was partnership with stakeholders both within and outside of the profession. Internationally educated health professionals reported that these partnerships improved their transition experience through increased social networks (Baumann et al., 2010; Kalu et al., 2019). In occupational therapy, the input and feedback from IEOTs, educators, clinicians, and representatives from regulatory and professional organizations, were crucial to executing a successful program. Working with community organizations and colleagues in other health professions enabled the team to access resources that would be needed in every step of the evolution, from finding IEOTs and securing professional liability insurance at field sites to sustainability planning for the program.

#### **Implications for Occupational Therapy Education**

The occupational therapy profession is enriched and strengthened by its diverse personnel, including IEOTs who bring their previous educational and practice experiences to a new context. Developing educational supports to facilitate IEOTs' transition to practice in a new country, upholds the profession's values and principles of facilitating occupational performance. An important means of ensuring occupational performance for IEOTs is through the provision of online learning platforms. Curriculum provided online increases accessibility for IEOTs whose geographical location may present a barrier to their engagement in learning. Providing both synchronous and asynchronous learning opportunities offer flexible means to support diverse needs, such as those of IEOTs who are also working, taking care of children, and/or other responsibilities. Furthermore, the availability of online support, particularly synchronous learning, enables IEOTs to experience a sense of professional community with colleagues. The transition experience can be isolating without a network of colleagues in the new context (Baptiste et al., 2010; Mulholland et al., 2013).

Next steps for OTepp as an educational program will include developing and modifying curriculum in response to learning gaps identified by IEOTs and regulatory organizations through the new assessment process. An important area for future research is to evaluate which components of the existing program are most influential in achieving the outcomes of passing the national exam, becoming licensed and obtaining employment.

#### Conclusion

A solid foundation was established during the OTepp project in relation to curriculum, processes and a culture of collaboration to assist IEOTs in their transition to practice. The engagement of IEOTs enabled a greater understanding of their needs, and as a result, the development of appropriate supports to meet those needs. Support from within the university ameliorated negative impacts arising from the end of the project's government funding. Strong relationships with regulatory organizations, professional associations, government and community agencies enabled OTepp to focus attention on its top priority – supporting IEOTs in their journey towards meeting the needs of clients requiring occupational therapy services.

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#### Appendix A

#### **OTepp Initial Course Offerings**

#### Orientation:

This course provides participants with an introduction to the technology they will need to use in order to participate in OTepp. Participants will: be introduced to the key concepts of the theory of occupational therapy in Canada, learn how to read literature and begin to develop a professional portfolio. An explanation of teaching methods and expectations of participants will be provided.

#### 1A Foundations of Professional Practice:

This course provides participants with the opportunity to study and discuss theories, models and concepts central to occupational therapy practice in Canada. Specifically, participants will explore communication with clients in terms of client-centered practice as well as communication with self in reflective practice. There will be particular emphasis on the Canadian Model of Occupational Performance (CMOP) and the Person-Environment-Occupation (PEO) Model in terms of understanding the profession's values in Canada. Reference to a new version of the CMOP (i.e. CMOP-E) will be discussed. Participants will then come to understand how these models and concepts are integrated in clinical reasoning and documentation.

#### 1B Understanding the Practice Context:

This course first provides participants with a picture of occupational therapy practice in Canada including the settings and practice areas in which therapists currently work. Further, it allows participants to explore professional and regulatory issues related to the structure and function of health care systems and organizations as well as the evolving practice settings and roles of occupational therapists. Participants will gain knowledge about interprofessional practice, issues of cultural sensitivity and ethical decision-making as an understanding of these concepts are important for practice in Canada.

#### 2A Understanding Practice Through Application of Theory:

This course follows 1A as it provides participants with opportunities to integrate new and existing knowledge of person, environment and occupation through the exploration of three broad problem scenarios. The problem scenarios have been developed from clinical situations and experiences. The clients in these scenarios represent various life stages, cultural backgrounds and lifestyles and are experiencing a variety of impairments and disabilities. Areas of focus in the seminars include the theoretical underpinnings of practice, ethics, spirituality, and development, determinants of occupation, occupational therapy practice settings and evidence-based practice.

#### 2B Understanding Evidence and Using it in Practice:

This course allows participants to focus on evidence-based occupational therapy practice by building on their learning with new concepts and skills each week. The

course will begin by examining what is meant by the term "evidence" and its relevance to occupational therapy practice in terms of assessment and treatment. Further, participants will discuss what constitutes good evidence, how it is obtained and then evaluated. Finally, the process of clinical decision-making regarding when and how evidence should influence practice will be explored. Participants will discuss and apply their learning in a variety of exercises.

#### 3 Putting it All Together:

This course provides participants with an opportunity to integrate their classroom learning to date in a clinical practicum experience at one of our sites of excellence for a minimum of 24 to a maximum of 30 hours in total. The course is designed to provide participants with an opportunity to examine their knowledge, skills and professional behaviours as they prepare to enter practice. A central focus of the course will be the development of practice that integrates knowledge of human occupation and health across the lifespan. The course will focus on professional competence in practice through self-assessment and the development and implementation of a learning contract. The contract and practicum hours may be used towards the requirements to practice as identified by the College of Occupational Therapists of Ontario (COTO).

#### **4A Mentorship:**

This optional course is an introduction to mentorship. Participants will have a guided opportunity to explore the potential importance and relevance of engaging in a mentoring relationship as an occupational therapist. Participants will take the time to understand the similarities and differences of various professional relationships and then reflect on their own needs and expectations from a mentoring relationship. Finally, strategies and resources for initiating and maintaining this type of relationship will be shared.

#### **4B Supervised Practice:**

This optional course is another clinical practicum opportunity of longer duration and more in-depth involvement on the part of the participant and preceptor. Participants will be expected to take a greater leadership role in terms of negotiating feasible learning objectives with the preceptor. These hours may also be used towards the participants' required clinical placement hours for the COTO.

#### Appendix B

#### **OTepp Module Offerings**

#### **Core Curriculum Module:**

This module was the certificate program created in Phase 1 and included all of the same courses previously described in Appendix A. The project team incorporated feedback from IEOTs, instructors and the advisory committees, resulting in several adjustments over phase 2. Rather than running two courses concurrently on two different evenings of the week, they were being offered sequentially from 2011 onward based on participant feedback about the high cognitive load. The module was renamed the OTepp Certificate Program to emphasize this value. Courses were renamed to reflect the language of the essential competencies used by the regulatory organizations. Courses 1 and 2 were lengthened to eight classes each to enable coverage of areas where IEOTs reported struggling. Participants were able to enroll in individual courses if desired but had to complete all five core courses to receive a certificate. The orientation course was removed and replaced by online resources accessible to students at any time. The short practicum course was removed and the final practicum lengthened from six weeks to eight weeks, or 300 hours. The lengthened practicum enabled IEOTs to have an in-depth experience, meet the requirements of the regulatory organizations for currency hours and access Canadian work experience demanded by employers.

#### **Exam Prep Module:**

The exam preparation group that existed prior to OTepp was formalized into the Exam Prep Module and became the most popular offering for the duration of the program. Small groups met once per week for six weeks before each scheduled national exam, to work through scenario-based questions. Occupational therapists facilitated these discussions, focusing on rationale and the clinical reasoning process. Because of the benefits and popularity of the module and to ensure its sustainability, the national association assumed delivery of the module in 2012. It was renamed the Occupational Therapy Exam Module (OTEM). In conjunction with this module, OTepp developed the Trial Occupational Therapy Exam (TOTE), a practice exam approximately half the length of the national exam. It was validated by the Certification Exam Committee and is available for purchase online in English and French. Finally, OTepp produced the Trial Occupational Therapy Examination Manual (TOTEM). This online guide contains 100 practice questions with rationale similar to the types of questions on the national exam is available in English and French.

#### **Work Readiness Module:**

The Work Readiness module covered themes such as the Canadian workplace environment, developing strategies for approaching job selection and application, gaining skills in culturally appropriate communication, and resume writing and interview suggestions. A self-directed online cultural intelligence guide with exercises was created as a pre-requisite to the module. This online resource continues to be

available from the national association and OTepp and has been used by occupational therapy programs and several student groups. At the end of the Work Readiness module, participants submit a cover letter and resume in response to a job posting and engage in a simulated job interview with an occupational therapist practice leader who subsequently provides feedback.

#### **Mentorship Module:**

The mentorship course was taken out of the certificate program and redesigned into a stand-alone module. This 3-session module used guided reflection to explore the concept of mentorship and the potential role of mentorship in professional development with IEOTs and prospective mentors, separately. After the third session in which the IEOTs (mentees) and potential mentors met online, IEOTs self-selected a mentor and initiated the relationship. The dyads then met face-to-face, by phone or Skype a minimum of three times in three months. All IEOTs and their occupational therapist mentors met during the final class to discuss their shared experiences and whether their objectives and expectations had been met.

#### Transition Counseling Module:

This module was designed to support and assist IEOTs who were changing their career goals away from occupational therapy. The module, consisting of three group sessions plus a month of individual coaching, included learning about life transitions, identifying optional pathways, developing effective coping strategies and determining achievable and satisfying life goals and plans. Due to a lack of response, this module was no longer offered after 2010. The module continues to have value for IEOTs who recognize the need to consider alternative career paths and may be offered as an option for the future.