Career Transition From Clinician to Academician: Responsibilities and Reflections

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Being an educator is just as much an art and a science as is being a clinician. This article describes the faculty role and its basic responsibilities for occupational therapy practitioners who are considering the transition to academic educator positions. The faculty role has unique characteristics. Differentiating therapy activities from academic activities is an essential part of a career transition from clinician to academician. This article also describes the various features of the academic context and its impact on individual performance, how to assess readiness for the faculty role, and the typical application process.

Occupational therapy education provides specific training in clinical management roles but not in faculty roles (Prendergast, David, & Leonard, 1991). Few occupational therapy practitioners have prior knowledge about the faculty member's role beyond observation of their own teachers in the classroom. Although these personal experiences may provide generic information regarding instructional methods, they do not provide a practitioner with an understanding of the faculty role in areas such as curriculum design, educational theory, or comprehensive faculty expectations. For many practitioners who have become educators, learning to be a faculty member has involved trial and error, serendipity, and, unfortunately, hard lessons accrued through crises.

The following recollections from different persons illustrate the experience of being a novice faculty member.

Case 1:

I recall my first day on faculty. I had been hired on a temporary 1-year contract the month before classes started as they could not fill a faculty position after a national search for a doctorally trained practitioner. I thought it would be a great opportunity to try the faculty role for 1 year with no further commitments. I had 1 week until my first class. I sat with the course outline in front of me. I had the first class session planned, orientation to the course, and the final session, the final examination. I had no idea what to do with all the sessions in between! I remember feeling panicked and nearly calling back my boss from the clinical position I had just left to see if I could return immediately.

Case 2:

I thought, “Wow! I only have to be in the classroom teaching 17 hours a week; I’ll have lots of free time!” I had just left a clinical position where I had to treat patients 38 to 45 hours a week! This was going to be a breeze! I thought I knew a lot about OT [occupational therapy] practice as I was a generalist, which would be invaluable in the classroom. It was but I had no idea of the preparation time needed for a class, especially ones with lab activities, [and] the time required for out-of-class activities such as grading and student communication was incredible. While I had more control over how I scheduled my work, weekly work hours were not reduced. I felt competent as a therapist; I expected this competence would carry over with me into the classroom, but I had no idea what really was required of a teacher in our college. Preparing a guest lecture or presenting an in-service or workshop is very different than preparing and delivering daily instruction in the classroom.

Case 3:

Rank, tenure, and promotion, I had heard about but I never realized what these really were until joining a faculty. Now I understand why I would get the weird answers from my faculty when I returned from vacations and semester breaks and asked them what fun things they did while we [students] were off.

Case 4:

My first faculty meetings were intriguing but frustrating. I listened to the faculty discuss topics at length and mull over a variety of alternatives to problems. They reflected on issues regarding possible outcomes but, more importantly, openly debated differing viewpoints. Few decisions were reached without intense discussion. This was not the clinical world where the opposite is now expected—do, do, do with little time to think or question. Now I realize that the value of this extensive reflection by faculty actually digs deep into the “whys and hows” of clinical practice. The change in pace is startling to the new teacher but is refreshing as you have opportunity to learn different ways of thinking and consider what is being written about practice from a variety of perspectives. Now I better appreciate the richness of our profession, past, present, and future.

Similarities Between Clinician and Educator Roles

Similarities between providing occupational therapy services and educating occupational students are outlined in Appendix A. Teaching and providing therapy are both forms of occupational therapy service delivery. If a person has served as a fieldwork educator, that experience facilitates the transition to the faculty role. In these comparisons, the recipient of services is either a student or patient. With similarities between practice and education, new faculty members can use their clinical experience as a foundation for education responsibilities.

Differentiating Therapeutic and Faculty Responsibilities

Despite the similarities between clinical and educator activities, “doing therapy” and “teaching therapy” are not synonymous activities. New faculty members must view students not as clients but as active, responsible, essentially self-motivated learners who (a) need to demonstrate a specific level of professional and technical competence for practice, (b) are reflective and interested in doing clinical reasoning and problem solving, (c) are two-way communicators, and (d) are committed to becoming quality occupational therapy practitioners.

Faculty members advise students as a teacher in the classroom and, frequently, as an academic adviser to individual students. Although the adviser role encompasses helping a student achieve academic goals and develop into a “professional,” being a student’s therapist or counselor is not the role of the academic adviser. The new faculty member must be attentive to this fact and avoid doing therapy with students because engaging in this process creates role confusion between the student and faculty member. Instead, these students must be referred to campus resources for extensive help or therapy with personal problems.

Facilitating Success as a Novice Educator

A positive transition from clinician to academic practitioner requires information and direct support. Introductory information regarding teaching and the faculty role and mentoring or co-teaching with an experienced educator can decrease the novice teacher’s anxiety and promote successful completion of novice faculty activities. A positive transition from clinician to academic practitioner requires information and direct support. Some encouraging reports of help with the novice year of teaching in occupational therapy have included the following:

Case 1:

My first year, I was mentored by an experienced faculty member in all my classes. He let me use his class notebooks as a reference and provided feedback on my lectures and exams during preparation, delivery, and afterwards.
Case 2:
My department was large and so several novice teachers started each year. The department had purchased the Allied Health Faculty Development series of workbooks from Medical College of Georgia, and we used these to develop fundamental skills in doing regular new faculty work sessions. In addition, a portion of every faculty meeting was set aside to discuss instructional or research strategies. I was able to listen to comments from OT educators from varying backgrounds and time in this role.

Case 3:
Our university has a wonderful two-day new faculty orientation meeting. They gave us materials reviewing the tenure requirements and process as well as nitty-gritty details, such as computerized test scoring resources and training on accessing the library from our office computer. This was followed by monthly support lunches to share our faculty activities with a recognized experienced faculty member. This started my networks with other campus departments. Then every mid-winter break, the university sponsored a three-day faculty development symposium to support our teaching and research activities, including balancing academic and personal life responsibilities. These events were very helpful to me as a new teacher.

Case 4:
My program chair made sure that I attended the faculty development workshops sponsored by the American Occupational Therapy Foundation several months before I began teaching. These were very helpful as I was guided through planning my first class and established a network with other new educators. My workshop peers and I still get together every year at conference and share experiences regarding being a faculty member.

Major Educator Responsibilities
The scope of faculty responsibilities varies, depending on the academic context and the conditions for appointment. The faculty performance expectations should be clarified and reviewed for “best fit” between responsibilities in a specific academic setting and personal interests. For example, faculty members of community colleges often carry heavy teaching loads but have limited research responsibilities. A major research university may encourage and reward its faculty members’ scholarship competence more than their teaching competence. Certainly, each faculty position requires a specific set of academic preparation and credentials. More importantly, faculty members should reflect on their educational readiness for and interest in meeting the faculty demands of the academic program.

Faculty responsibilities will vary among the three major faculty activities of teaching, research, and service. Teaching includes all types of student instruction and advising activities, including student research. Credit hours and contact hours each week in the classroom are two ways one’s teaching load is measured. Research, sometimes referred to as scholarship, includes all activities generating new knowledge or creative ways of thinking. This includes a wide array of activities, such as presentations, publications, and grants. Service includes department, university, professional, and community leadership, and committee work or assistance. Because of the large variance in expectations for these activities across, and sometimes within, academic programs in occupational therapy, a person can find an academic setting that best meets his or her preferred academic activities.

Faculty expectations vary according to the mission of the academic institution and the goals of the occupational therapy educational program. For instance, in technical-level education, frequently the primary responsibility is teaching, whereas in a Research I university, the emphasis is on high-level, funded research. A teaching load might be 25 contact hours per week at a community college and only 3 contact hours per week at a research university. Many academic environments may expect a faculty member to perform a service activity yet not give much weight to this activity for retention and promotion. Likewise, administration or management or fieldwork coordinator activities may not be given much weight during annual faculty performance reviews at an institution. Knowing institutional expectations and values for faculty performance is essential for selecting an academic program that matches one’s personal and professional objectives for becoming a faculty member.

The diversity in academic environments provides many opportunities for new faculty members to match their interests and professional goals as an educator with the academic institution’s expectations for their performance. In addition, new faculty members must be aware of how their institution rewards faculty activities. Typically, faculty performance is reviewed and rewarded annually through the following four activities: (a) annual salary increase, especially merit pay; (b) contract extension; (c) promotion in rank for attaining advanced competence in faculty activities (i.e., assistant to associate to full professor); and (d) awarding of tenure. Sabbaticals are granted every 6 to 7 years to valued faculty members so that they can engage in intense scholarship or other faculty-renewal activities that result in enhanced academic performance.

Unique Characteristics of the Academic Context
Annual Faculty Performance
Like clinicians, faculty members are expected to be self-motivated, but external, periodic checks on faculty members are far less frequent. A faculty position offers a great deal of autonomy and self-discipline to complete teaching, research, and service activities. Most faculty members have an annual performance plan that is an agreement with their program director regarding how their time will be allocated to faculty activities and what activities will be considered necessary and valuable. The outcomes from faculty activities become the basis for annual performance review processes, retention decisions, and the next year’s objectives.

Faculty members are expected to be appropriately prepared to assume responsibilities. This typically means preparation at the doctoral or at least the master’s level. After a faculty member accepts a position within the academy, it is important that a development plan be outlined and supported so that faculty expectations can be met.
Tenure and Promotion

Faculty members may enter the academy in a tenure-track or a non-tenure-track position, which may be based on employment negotiations that reflect tenure-track standards for the institution. For instance, in some settings a person's academic degrees may determine eligibility toward tenure, but in other settings, one's clinical expertise, prior teaching experience, and scholarship may be a determining factor. Tenure is awarded to faculty members after review by the academy's tenured professoriat, who uphold the institutional mission, faculty ideals, and academic standards. The primary intent is to recognize the faculty member as a valued scholar with noted respect and accorded academic freedom to pursue knowledge development. Unfortunately, tenure has become a form of "permanent job security." Consequently, tenure, in general, is hotly debated, tightly controlled, and is even being eliminated in some academic environments.

The faculty member must pace his or her performance toward this goal and ensure that sufficient, quality outcomes provide evidence regarding ability to be tenured or promoted in rank. To receive tenure, a faculty member has essentially 6 years to accumulate outcomes that demonstrate competence in contributing to the academic institution's mission and meeting departmental expectations. Number and type of publications presentations, scholarship, and teaching are all activities considered during the tenure review. Promotion eligibility may have a "time in rank" requirement and specified performance requirements. As a result, annual performance may have a more far-reaching schedule than just 12 calendar months. Annual reviews of goals and performance provide novice faculty members with an initial guide to achieving tenure and promotion, but "building one's case for tenure" remains the sole responsibility of the faculty member. This requires considerable self-direction to stay on track, and mentor relationships are highly encouraged.

Value Regarding Clinical Practice Involvement

A unique characteristic of the academic environment is that the faculty member must not only address faculty role responsibilities, but also maintain clinical competence in a specific instructional area to provide contemporary teaching content. Thus, the new faculty member needs a plan to retain clinical competence. For some, retaining clinical competence may include (a) attending clinical seminars or conferences, (b) doing collaborative clinical-based research (outcome studies), (c) reading related literature, (d) networking with practitioners, and (e) possibly practicing on a part-time basis either as part of a faculty part-time practice plan or as a fieldwork site supervisor. The faculty member must be cognizant of the relative value placed on maintaining clinical competence in his or her specific academic environment and on performing typical faculty duties. Maintaining dual credentials, clinical and academic, is a continual challenge for occupational therapy educators. Not all educators on a campus have similar requirements, meaning that maintaining clinical competence in occupational therapy may not be rewarded or recognized by the academy.

Performance Recognition

Another difference between the academic and clinical environments is less frequent praise and gratitude for hard work, which new faculty members often miss. Students, as consumers, pay for their education and believe that they are therefore entitled to it. New faculty members often miss the regular thanks and praise they received from clients and their families. For a faculty member, gratification may be delayed. In fact, it may be years before students report how learning or advising experiences with faculty members made a difference in their professional lives. The greatest pleasure is seeing a student succeed professionally and knowing the part one played in that process. Experienced educators remember the hours spent toiling over lecture and lab preparations and the feeling of those cathartic moments when learning was maximized. However, students most often cite a special, unplanned moment with a faculty member who focused on the student's specific needs, such as reported here:

I remember walking through AOTA [American Occupational Therapy Association] conference exhibits one year and unexpectedly seeing one of my first students as an exhibitor. She openly acknowledged what a significant part I played in her success and happiness. Of course, with these opening comments, I tried to reflect backwards to remember a specific "teachable moment" we might have experienced together. Finally, I asked the student what had happened earlier between us, and as usual, it wasn't my creative teaching methods or academic brilliance, but rather caring about the student as an individual. She said my expression of confidence in her coping successfully with her divorce gave her hope and self-esteem.

The art of teaching is carried out in “teachable moments,” those times a student is fully ready for and wholly receptive to learning based on their individual needs. These moments result in the performance recognition valued by faculty members.

From Application to Faculty Appointment

Applying for a faculty position is a protracted process that may take several months to complete. Before submitting materials, applicants should ascertain that the educational philosophy and performance requirements of the institution match their own interests and current abilities. Applicants might browse catalogs or Web pages or talk with the chairperson of the faculty search committee. The process begins by submitting a letter of interest along with the accompanying materials requested in the position announcement. The requested items will include a curriculum vitae and possibly other items, such as a statement of teaching philosophy and references or reference letters.
A curriculum vitae is important for negotiating a position with administration. Different than clinical practice resumes, which focus on acquired continuing education, a faculty vita should focus on the faculty member's demonstrated knowledge and abilities for teaching and scholarly activities at a level valued within the academic institution.

A philosophy statement usually focuses on how the applicant views the art and science of teaching and promotes student learning. Congruence with the school's and department's mission and educational philosophy is noted by search committees. For occupational therapy faculty applicants, one's view on the profession and how this view will influence one's educational approach is important.

Faculty interviews typically are 1 to 3 days in length and include meeting with a variety of administrators, faculty members, and students. A formal presentation may be requested to demonstrate teaching style or scholarship. Learning the purpose of this presentation and the potential audience before the interview is advised.

Learning about the faculty role and the academic context is nearly as intensive during the interview as is learning about occupational therapy practitioner role expectations during an employment interview. Being an educator requires engagement in faculty professional development activities valued by the specific academic institution, activities that go beyond clinical expertise.

Faculty Development Resources

Like clinical activities, the faculty role has important "art and science" components and requires a journey of continuous learning. The American Occupational Therapy Foundation sponsors a workshop at AOTA's Annual Conference called the "Academic Juggling Act," which is a resource for faculty role development. Brayley (1996) outlined occupational therapy faculty role responsibilities in her book, From Clinician to Academician. A seven-part series of articles published in OT/Advance discusses the fundamentals of the academic role to encourage consideration by practitioners (Crist, 1993a–1993g). The faculty role has been described in the AOTA's (1993) roles document and its companion guide (AOTA, 1994a) (see Appendix B). In addition, numerous publications on faculty role responsibilities are available, such as from Jossey-Bass, one of the largest publishers of books about academia. Educators must also read publications specific to higher education. Membership in associations such as the American Educational Research Association, the American Association of Higher Education, and the Professional and Organizational Network in Higher Education is strongly suggested.

Summary

The foundation for competence as a faculty member in occupational therapy education programs is acquired through experience as an occupational therapy service provider. The decision to move into the academic environment is multifaceted and depends on career goals. The transition from practitioner to educator can be a challenging adventure for persons who enjoy and value learning activities. The educator role, as described in this article, has specific competencies unique to the academic context.

Education provides an invigorating and challenging context for occupational therapists at various stages of their careers. As with any new role, the occupational therapy practitioner must be ready to engage in new professional development activities and continuous learning related to quality teaching, scholarship, and service, in addition to establishing a specific clinical teaching expertise.

Becoming an occupational therapy educator is both an art and a science. The 1995–1998 AOTA Education Special Interest Section Standing Committee expressed the unique role of faculty members in our profession in their motto for educators—“Our practice is education.”

Appendix A

Faculty and Clinician Role Similarities

- Are enthusiastic about their work
- Share clinical expertise and knowledge
- Project positive attitude about recipient's learning ability
- Begin where the recipient is and arrange learning tasks sequentially according to abilities
- Establish relevance of material or skills to be learned or demonstrated
- Involve recipient in choosing what will be learned
- Create challenging goals for self and recipient
- Facilitate effective practitioner–recipient interactions
- Assess accurately recipient's performance or learning
- Create beneficial learning and treatment plans
- Provide meaningful, active learning activities
- Give positive reinforcement and feedback for learning new role skills
- Are receptive to listening and talking with recipients
- Are committed to role and related functions
- Develop individual approach to learning needs
- Treat the recipient with respect
- Present clearly
- Organize work tasks effectively
- Work collaboratively with colleagues
- Manage time effectively and efficiently

Appendix B

The Occupational Therapy Role Described

Major Function
Provides formal academic education for occupational therapy and occupational therapy assistant students.

Scope of Role
This role varies among institutions as does the subsequent balance expected among teaching, service, and scholarly activities. Progression within this role typically advances from lecturer and instructor to the professional ranks, including assistant, associate, full, and emeritus professorships. Included in the faculty role may be adjunct, clinical, or academic appointments.

Key Performance Areas (entry-level skills only listed for the purposes of this publication)
• Develops educational course objectives and sequences the content to promote optimal learning.
• Designs and structures effective educational experiences, including methods, media, content area, and types of student interactions.
• Facilitates students' learning through lectures, discussions, practical and laboratory exercises, and practice-related experiences.
• Evaluates and addresses student learning needs within their social and cultural environmental context.
• Reviews educational media and published resources and selects class readings or supplemental materials.
• Plans and prepares course materials to include course syllabi, lectures, case studies, teaching and learning handouts, and questions for group discussion.
• Prepares evaluation materials and measures student attainment of stated course objectives.
• Develops and maintains proficiency in teaching areas through investigation, formal education, continuing education, and practice.
• Participates in curriculum development.
• Participates in teaching evaluation and uses outcome data to modify teaching.
• Advises students and student groups.
• Serves on department, school, college, or university committees.
• Assists with designated departmental administrative tasks, such as student admissions, recruitment, and course scheduling.
• Maintains students' records according to regulations and procedures.
• Functions according to Occupational Therapy Code of Ethics (AOTA, 1994b) and Standards of Practice for Occupational Therapy (AOTA, 1998).

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