The consensus within our profession is that the fieldwork experience plays an integral role in an occupational therapist's professional development. In 1923, the first educational standards requiring fieldwork experiences were approved by the American Occupational Therapy Association (AOTA). Today, in addition to academic course work, 6 months of supervised fieldwork is a required prerequisite for the national certification examination. Summarizing a prevalent perspective on fieldwork, Presseller (1983) said, “The process and content of fieldwork experiences have been debated over the years, yet the value of having an opportunity to apply theory to practice has never been denied” (p. 163).

The “Essentials and Guidelines of an Accredited Educational Program for the Occupational Therapist” (AOTA, 1983) provide the profession’s most recently accepted statement of the purpose of the fieldwork component of our professional preparation. The Essentials state, “The purpose of fieldwork is to provide an in-depth experience in delivering occupational therapy services to clients. There should be opportunities for supervised practice of occupational therapist entry-level roles” (p. 819).

The Problem
Although the profession values the fieldwork experience, minimal attention has been directed to preparing therapists to assume the crucial role of fieldwork educator (Crist, 1986). The Essentials delineate the minimum requirement for fieldwork educators: Occupational therapists qualify as fieldwork educators after 1 year of experience and are not required to meet additional requirements. Since fieldwork supervision skills go beyond the knowledge and skills necessary for entry level practice, very few entry level curricula offer formal training in supervision theory and practice. Consequently, lack of experience and absence of training frequently leave the new supervisor searching for direction. More often than not, the process of becoming an effective fieldwork educator is an evolutionary one based on trial and error. Fieldwork educators are expected to solidify the occupational therapy students' professional training, yet their primary role is patient care. Their expertise is in various clinical areas and skills rather than in supervision theory and practice. This situation is not unique to occupational therapy. Addressing the educational needs of professionals, Phyllis Caldwell (1981) said that “most teachers of adults in professional continuing education have in-depth knowledge and expertise with the content of a specialized field but little preparation in the design of appropriate learning situations for adults” (p. 4). Schön (1983) likewise said, “Professionals are called upon to perform tasks for which they have not been educated” (p. 14). Both of these pronouncements apply to the present practice within the occupational therapy profession.

The value of the fieldwork experience was documented by Christie, Joyce, and Moeller (1985), who surveyed students and supervisors in 65 fieldwork centers. They found that fieldwork had the greatest impact on the development of a therapist’s preference for a specific area of clinical practice. Additionally, they identified supervision as the most critical component of the fieldwork experience. They found that effective supervision was the most frequently mentioned critical component of a “good” fieldwork experience (p. 674). Given the importance of both the fieldwork experience and effective supervision, we believe fieldwork educators need formal preparation for the essential role of supervisor. Educational materials must be creatively designed for and offered to fieldwork educators to help them succeed in this role.

Educational Needs of Fieldwork Educators
Our belief in the need for further education for fieldwork educators was reinforced by findings of a national...
needs assessment conducted by AOTA regional fieldwork consultants (Frum, 1986). The assessment was intended to identify (a) priority topics for potential workshops, (b) fieldwork educators’ likelihood of attending a workshop dealing with fieldwork education, (c) the three most important problems needing resolution in fieldwork education, (d) mechanisms other than workshops to meet training needs, and (e) years of experience as a fieldwork educator. Of the 1,018 surveys distributed nationally, 639 (63%) were returned; 574 were completed by fieldwork educators and 65 by academic fieldwork coordinators. The majority of the fieldwork educators had had 1 year of experience supervising students.

The major findings focused on here are the priority topics and problems. The top five priority topics for workshops selected by the respondents from a list of 20 topics were (a) analyzing and bridging the gap between classroom and clinic, (b) evaluating student performance, (c) linking theory to practice, (d) solving problems frequently encountered in fieldwork, and (e) supervising students. The three most important problems needing resolution in fieldwork education identified by the fieldwork educators were (a) limited time for student supervision, (b) lack of integration of knowledge and skills between classroom and clinic, and (c) students’ lack of knowledge and skills. The academic fieldwork coordinators identified three different problems: (a) shortage of high-quality fieldwork facilities, (b) inadequate supervisory skills of fieldwork educators, and (c) inadequate communication between academic and clinical staff.

Discussion
These survey results both reinforce the need for continuing education related to fieldwork and highlight various challenges confronting our fieldwork educators. A discrepancy between theory and practice was a repeated theme throughout the survey. It was identified as a priority topic for workshops (e.g., the gap between classroom and clinic and linking theory to practice) and also as one of the three major problems currently facing fieldwork educators. The discrepancy between theory and practice is not limited to fieldwork since this issue confronts the entire profession. Presently, little is known about the reasoning process that transforms the theories of the profession into sound clinical judgments. This discrepancy was captured by Rogers in her 1983 Slagle lecture, when she suggested that “our cognitive processes are regarded as intuitive and ineffable” (p. 601).

The data obtained from the survey revealed that fieldwork educators felt that occupational therapy students do not have the necessary academic foundation for practice when they arrive in the clinic. On the other hand, although fieldwork educators claimed that students are not prepared for the clinic, the academic fieldwork coordinators thought that the fieldwork educators may not be sufficiently skilled in supervisory theory and techniques. The fieldwork educators may perform tasks, such as evaluating students’ performance or handling fieldwork problems, without formal preparation. Any problems that result from inadequate training in supervision may be compounded by the fact that most fieldwork educators have had only 1 year of clinical experience. In sum, the central problem is that fieldwork educators are thrust into the crucial role of supervisor without the necessary foundation to supervise whereas students are not adequately prepared to meet the uncertainties inherent in clinical practice. Each group feels that the other group has not been adequately prepared for its present role.

The problem is exacerbated by the rapidly changing practice environment. The emphasis on productivity and cost containment, the increasing complexity of health care technology, the growing diversity of the conditions treated, and new funding patterns have forced fieldwork educators to focus on efficiency. Since fieldwork educators’ responsibilities in the practice setting have greatly increased, time for student supervision, already identified as a major problem on the survey, has become precious.

Recommendations
Although the survey underlines the need for continuing education, we must address the larger issues embedded in the data before developing continuing education materials. The larger issue of the discrepancy between theory and practice is now well documented. Rogers (1983), as stated above, advocated the need to explain the reasoning process by which we transform theory into practice, and the recent Entry-Level Study Committee report (AOTA, 1987) repeatedly emphasized the need for clinicians to merge theory and practice. To teach the application of theory to practice, one must understand the relationship between theory and practice. Presently, the American Occupational Therapy Foundation (AOTF) and AOTA are jointly funding a yearlong pilot study to examine the clinical reasoning processes that reflect occupational therapists’ knowledge and use of theory in practice (Gillette & Mattingly, 1987). We must have an articulated understanding of how we transform theory into practice before we can reach this process to students. Thus, fieldwork educators and academic fieldwork coordinators will benefit from following the progress of the AOTA/AOTF clinical reasoning study because the findings will provide valuable information for assessing and redesigning academic and fieldwork programs.

Another issue embedded in the survey data was the tension that exists between the classroom and the clinic. This tension must be replaced by collaboration. Academic and clinical staff have an interdependent relationship in educating future clinicians. Therefore, it is essential that they engage in a dialogue and share ideas, information, and resources. They can collaborate to assess the curricula that prepare students for practice and to develop continuing education materials for fieldwork educators. The minicouncil model implemented in California is one example of a collaborative partnership (Still, 1982). In this model, discussion groups, held once a semester, focus on educational issues of mutual concern to faculty members (academic and clinical), and students. Topics such as evaluating student performance, setting realistic expectations for performance, or facilitating the transition into the professional role are discussed. Address-
ing these topics together fosters a unified sense of purpose in faculty members, fieldwork educators, and students.

To supplement existing resources, the regional fieldwork consultants and the AOTA fieldwork specialist need to further develop and disseminate training materials to teach fieldwork educators how to supervise students, evaluate students' performance, handle fieldwork problems, and design time-efficient/cost-effective fieldwork programs. Since clinicians are constantly moving into the fieldwork educator role, the materials should be self-contained for repeated use with new supervisors. One example of a self-contained educational unit is the video and manual produced by the Rush University Occupational Therapy staff and the AOTA fieldwork specialist (Frum & Opacic, 1987). Another example of such a unit is embodied in the New England Occupational Therapy Education Council proposal for continuing education for fieldwork educators currently under consideration by AOTA. The proposed program would include a number of self-instructional units designed in a workbook format with accompanying videotapes of student/patient/supervisor interactions. The materials would provide an ongoing system of continuing education that could be delivered at the local level to entry level fieldwork supervisors (Crepeau, 1985).

Summary

Students completing fieldwork are the future of our profession. We can no longer allow our fieldwork educators to develop skills to supervise, teach, and evaluate students on a trial-and-error basis. By allocating resources to develop continuing education materials to be used in developing these skills, the profession will be acknowledging its long-standing espoused commitment to fieldwork.

The development of continuing education materials must be based on an understanding of how experienced clinicians reason about their practice and transform occupational therapy theory into clinical practice. Critical analysis of the reasoning process will help us teach this process to students. Additionally, we need to develop self-contained educational materials to prepare our fieldwork educators to design fieldwork programs, supervise students, and handle administrative issues related to fieldwork. Finally, fieldwork educators and academic faculty need to collaborate to provide our future practitioners with an integrated academic and clinical education.

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References


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