

JOTEJournal of Occupational
Therapy Education

Volume 3 | Issue 3

Original
Research

Article 8

2019

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Recommended Citation

Keptner, K. M., & Klein, S. M. (2019). Collaborative Learning in a Faculty-led Occupational Therapy Level I Fieldwork: A Case Study. *Journal of Occupational Therapy Education*, 3 (3). <https://doi.org/10.26681/jote.2019.030308>

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Abstract

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Keywords

Collaborative learning model, occupational therapy, qualitative, supervision

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Acknowledgements

We thank Bette Bonder, PhD, OTR/L, FAOTA for facilitating the focus group that was an important part of the data collection process and for her input regarding the final manuscript.

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Therapy Education

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ABSTRACT

Fieldwork experiences in occupational therapy are meant to bridge the gap between academic learning and clinical practice. Various formats for fieldwork experiences have been encouraged as sites become harder to find. A faculty-led fieldwork experience is one suggested format. Faculty-led initiatives using a collaborative learning model (CLM) allow faculty to supervise a group of students at one time. In order to understand more about using a CLM within Level I fieldwork, a case study approach was used to describe the experience of nine occupational therapy students. Results suggest that the students involved in this faculty-led Level I fieldwork experience in a CLM were self-directed and reflective in practice as they were stretched outside their comfort zone. Under a faculty-led collaborative student supervision model, the occupational therapy students increased their confidence and learned clinical reasoning skills through peer collaboration. These results suggest that CLM can provide adequate structure for faculty-led fieldwork initiatives. Occupational therapy programs should provide opportunities to develop goals and be reflective and self-directed in practice during faculty-led Level I fieldwork experiences. Other considerations for OT programs wishing to develop such experiences are discussed.

INTRODUCTION

Fieldwork education in occupational therapy refers to observations, learning activities, and experiences outside the classroom that help students translate knowledge from the

academic setting to the health care environment (Accreditation Council for Occupational Therapy Education [ACOTE], 2018; American Occupational Therapy Association [AOTA], 2016; Costa, 2015). However, there is an increasing burden on sites for occupational therapy fieldwork placements in light of increased overall enrollment in programs nationally (Roberts, 2017). Not only are fieldwork sites more difficult to find, students must enter fieldwork with more skill than their predecessors as client populations become increasingly complex (Varland, Cardell, Koski, & McFadden, 2017; World Health Organization, 2017). Students may also face higher expectations and enter the workforce with less opportunity for mentorship (Aiken, Menaker, & Barsky, 2001; Preissner & Killian, 2018; Varland et al., 2017). As a response, occupational therapy students need to improve their independent thinking skills at an earlier stage of development than was previously expected in order to transition into jobs more readily (AOTA, 2017; Mattila & Dolhi, 2016). Level I fieldwork experiences are provided within academic curricula and can be structured to improve student independent thinking skills in order to advance their clinical practice; while faculty-led Level I experiences can also help ease local demand for sites (AOTA, 2016). Collaborative learning models (CLM) rely on multiple student to faculty ratios for clinical education and have been common in nursing education for decades. These models have yet to be used or explored as extensively in occupational therapy education. One concern with CLMs is that the student learning experience occurs in a group environment with less direct supervision from the fieldwork educator. In order to explore the student experience using a CLM, this study looked at the experiences of a group of students who participated in a specific Level I faculty-led fieldwork experience.

LITERATURE REVIEW

Fieldwork in Occupational Therapy Education

Level I fieldwork occurs simultaneously with academic learning and can involve both clinical practice and observation (ACOTE, 2018). Faculty-led fieldwork experiences meet the requirement for Level I experiences (ACOTE, 2018; AOTA, 2016). “Faculty-led” Level I fieldwork suggests that faculty provide the supervision needed during Level I clinical placements. It is hypothesized that faculty-led Level I fieldwork can provide students an appropriately structured learning experience while reducing the placement burden on the community.

Faculty-led supervision has been common (and considered “traditional”) in nursing programs for many years (Nordgren, Richardson, & Laurella, 1998). Clinical faculty in nursing commonly supervise up to 10 students at one time on clinical rotations (Institute of Medicine, 2011; Nordgren et al., 1998). This faculty preceptor to student ratio creates a situation where students must function with less feedback and support from their faculty preceptor. The faculty-led supervision model arose out of necessity due to faculty shortages and demand for nurses, which mirrors the trajectory of occupational therapy education. Unfortunately, recent evidence suggests that these models may not

be as beneficial as once believed since students may miss learning opportunities when they are working more independently from their preceptor (Luhanga, 2018).

Despite some question about the benefits of this type of supervision in nursing, evidence from traditional and role emerging fieldwork experiences in occupational therapy suggest that learning models that use limited supervision or collaborative peer learning can enhance active learning and client centeredness (Provident & Colmer, 2013). For example, occupational therapy students who participated in Level II fieldwork with no on-site fieldwork educator demonstrated improved personal and professional development compared to their peers who were in a traditional fieldwork with an on-site fieldwork educator (Gat & Ratzon, 2014; Mulholland & Derald, 2005). In addition, occupational therapy students with limited direct supervision were encouraged by the flexibility of the non-traditional supervisory structure. As compared with students in traditional fieldwork placements, students with limited supervision were more reflective about their practice, used more creativity in program planning, and developed more independent thinking, planning, and problem solving skills (Gat & Ratzon, 2014; Wood, 2005). A faculty led supervision model also allowed students to develop a better understanding of occupational therapy and the way that the foundations of occupational therapy can be applied in practice (Mattila & Dolhi, 2016).

In contrast, students who participated in Level II fieldwork placements with less structured supervision tended to feel stretched outside their comfort zone which proved, at times, to be overwhelming, isolating, and/or anxiety producing (Gat & Ratzon, 2014; Wood, 2005). Some students who had no on-site fieldwork educator had difficulty performing effective occupational therapy functions and/or had difficulty articulating their role (Muholland & Derald, 2005). In addition, students who did not have full-time direct supervision had difficulty connecting the skills learned in a non-traditional setting to their future employment opportunities (Overton, Clarke, & Thomas, 2009; Wood, 2005).

Fieldwork Supervision Models

Traditional supervision models in occupational therapy rely on an apprenticeship model with one student to one supervisor. Alternate supervision models have risen out of a need to provide clinical supervision to an increasing number of students; one such model is a CLM. Collaborative learning models may be a viable alternative to a 1:1 supervision model. Collaborative learning models rely on peer-to-peer interaction as a way to structure faculty-led Level I fieldwork in order to help students develop clinical problem solving skills when faced with limited, direct supervision (Hanson & Deluliis, 2015). Collaborative learning activities rely on peer interaction to solve clinical dilemmas. The expectation when using a CLM is that students will rely on each other with less input from the supervisor to achieve clinical goals while on-site. In order for CLM to be effective, Johnson and Johnson (1990) suggested five important elements: positive interdependence, individual accountability, face-to-face interaction, group skills, and group processing. Positive interdependence is demonstrated when student

participants are not only interested in their own development, but the development of peers. Individual accountability is demonstrated when individuals within the group develop goals and determine ways that goals can be measured and work to achieve them. Students must also participate in face-to-face interaction with peers in order to problem solve and reflect on their challenges and successes in learning. Finally, group members must demonstrate awareness of group skills and group processing in order to identify areas for improvement in the group environment and successfully implement effective solutions to conflict.

Problem Statement

Since fieldwork sites in occupational therapy are increasingly difficult to secure, alternative supervision models to 1:1 (apprenticeship) direct supervision models in Level I fieldwork need to be explored. Faculty-led Level I experiences that employ alternative supervision can reduce local placement burden because they can rely on a larger student to supervision ratio than a 1:1 direct supervision model. Collaborative learning models use peer-to-peer interaction as a learning tool when there is less than full-time direct supervision from a fieldwork educator, however, research on how these models work in occupational therapy is limited. The student experience of supervision is an important consideration in providing these experiences. Therefore, it is important to explore the student experience during a faculty-led practicum fieldwork that employs CLM to determine if this could be a viable alternative model for Level I fieldwork.

METHODS

The purpose of this research was to understand the student experience in a faculty-led Level I fieldwork developed through a CLM. A multiple, qualitative case study design based on a constructivist framework was used (Yin, 2013a). The objective was to understand how students experienced a CLM within a faculty-led Level I fieldwork. Specifically, the researchers wanted to explore: 1) What was the experience of students in a faculty-led Level I fieldwork with less than full-time direct supervision? and 2) How did students interact and learn from peers while receiving less than full-time direct supervision?

Participants

The participants were nine graduate-level Master of Occupational Therapy students from a public university in the Midwest. They were all female, ranging in age from 24-32. Participants were recruited using purposive sampling from one cohort of occupational therapy students and were selected by the faculty fieldwork educator based on their interest and ability to complete such an experience, since it was completed outside the students' residential state. The students were in their final academic semester within the program when they completed this Level I fieldwork. The case study analysis looked at the experience of all nine students so that differing and similar experiences could be explored. Approval to include these students in the research was granted by the Institutional Review Board (IRB) of Cleveland State University (IRB #FY2016-154).

Students were included in this study if they agreed to participate after being informed of their rights as research participants. All the students involved in the Level I fieldwork agreed to participate in the study (n=9), and only one student missed the post-experience focus group discussion due to a scheduling error. While the preschool teachers and the preschool children were inevitably impacted by the presence of the occupational therapy students, they were not included in the analysis for this study.

Structure and Experience of the Level I Fieldwork

Nine students volunteered to participate in a semester of learning activities followed by a clinical experience in a preschool setting to fulfill one Level I fieldwork credit in a Master of Occupational Therapy program. The preschool setting was located in a health care professional shortage area as designated by the federal government and located near the Navajo reservation in New Mexico. The preschool was chosen since it had enough classrooms across multiple sites to accommodate occupational therapy students in groups of two or three and there was demonstrated need for occupational therapy services; a number of the preschool children had individualized education plans but the preschool program had no on-site occupational therapy services.

Students were assigned partners early in the process in order to practice working together and to learn how peer-learning functions (Stenberg & Carlson, 2015). Student pairs were selected by the faculty, with preferences provided by the students. Since the students had already been through four semesters of the program together, they had an idea with whom they might like to work and whose learning style might match their own. The faculty member solicited these student preferences. At the final decision phase, the faculty member used her knowledge of the student skills and motivations to determine if their preferred matches were congruent with learning. In many cases, this was feasible. One group was formed with three members who did not identify specific matches within the available group but seemed to have common motivation for the experience.

The learning activities were divided into three phases: preparation, on-site, and follow-up reflection. The preparation phase occurred during the semester leading up to the on-site fieldwork experience. Following the preparation stage, the students along with the faculty supervisor, traveled to the clinical site which was out of state from the occupational therapy program. The students were on-site for 10 days, five of which were full days working at the preschool facility. On working days, the faculty supervisor accompanied each student group to their site. Students were placed in classrooms in their pre-determined peer groups. Certified pre-K teachers were on-site for any immediate needs. Non-working days were filled with cultural and educational activities. Students were supervised by an occupational therapy faculty member, who also assisted with the data analysis. Table 1 presents the various learning activities that occurred.

Table 1

Description of Activities Completed at Each Phase of the Level I Fieldwork Experience

Phases of the Level I Fieldwork	Learning Activities
Preparation phase	<ul style="list-style-type: none"> • Each student group created a “book” of possible activities to provide on-site along with methods to adapt them. • Students problem solved with an experienced preschool occupational therapist possible issues in a preschool environment. • Each student completed an assessment and intervention plan on a preschool aged child. • The group discussed peer learning and practiced how to resolve conflict with peers.
On-site phase	<ul style="list-style-type: none"> • The occupational therapy faculty supervisor rotated classrooms to observe through the week, visiting each classroom at least twice in the five days. • After the work day, the group met to reflect and discuss successes and challenges from the day, listen to other student experiences, and plan for the following day. • Students were given journal prompts to complete over the five days.
Reflection/follow-up phase	<ul style="list-style-type: none"> • Students completed a SOAP note on one student from the clinical experience. • Students evaluated the fieldwork experience and both their peer and their own performance. • Students met with the faculty supervisor to discuss their performance and discuss any concerns with their peers. • Students participated in the focus group to debrief about the meaning of the experience.

Note: SOAP stands for Subjective/Objective/Assessment/Plan

Data Sources

In order to assure construct validity, the researchers produced data that were sufficient in quantity to become saturated and were collected in various forms so that they could be triangulated. Sample instructions and questions for each data source can be found in Table 2. All data collected were collected and secured by a graduate assistant until student grades were submitted, as per the IRB protocol, since the primary investigator

was also the fieldwork educator. After grades were submitted, the primary investigator was able to manage the data.

Journals. Students kept journals daily during the on-site Level I fieldwork experience.

Photovoice entries. Photovoice methodology allows a research participant to use visualization to describe an experience through photographs (Lopez, Eugenia, Randall-David, & Robinson, 2005). Students were asked to take at least three pictures during the week that were personally meaningful to their experience. The students were instructed not to include any pictures of the children since permission was not obtained to include the image of any child. Instead, the occupational therapy students took pictures of objects or places that were reflective of their experience.

Field notes. The faculty supervisor kept field notes from the initiation of the experience (from pre-trip phases) to post-trip reflection meetings. Daily reflections were structured in the form of critical incident analysis and field notes were written based on group discussion. Informal observations were made during to and from the sites, during site visits, and during reflection meetings.

Focus group. A focus group occurred after the experience and was facilitated by a researcher with many years of experience as both an occupational therapist and a qualitative researcher. The students were informed that the focus group would be audiotaped via an audio recorder. The audio recording was handled by a graduate assistant and the focus group facilitator until the semester was completed, as per IRB guidelines. The focus group audiotape was transcribed by an independent transcription service, not affiliated with the university.

Table 2

Data Sources with Sample Instructions and/or Questions for Each

Data Source	Sample Instructions and/or Questions
Journal	Sample journal prompts: Identify at least three clinical goals and how you will meet them. Describe any clinical difficulties that you faced today. What challenges have you faced and how have you resolved them? Describe some successes that you have had in your professional or clinical skills? Describe your professional relationship(s) with your peers, preschool teachers, and occupational therapy supervisor.
Photovoice entries	Take a series of photos (at least three) that reflect your experience. Choose a theme: the expectations you had before arriving, challenges you experienced while on site, experiences you had about the fieldwork that were not anticipated, etc. Make sure that the photos reflect your

experience in some way. Think about what you want to capture via photo before you take the photos and how the photos might best represent your theme. The photos can be objects, places, signs, etc. however, please do not take photos of people. Once you have taken three photos, write why you chose each photo and write a caption for each. The caption should describe what the photo means to you and your experience on fieldwork. If it answers some question for you, describe that. Be creative!!

Focus group Sample questions: In what ways did you experience peer learning during your fieldwork? In what ways did peer learning impact your experience? What are some characteristics that would make a student more successful participating in this type of fieldwork?

How has this experience changed (or not) the way you will approach your role as an OT in the future?

What personal goals did you achieve over the course of the week?
What clinical skills did you improve upon over the course of the week?

The primary investigator generated new questions for data collection as part of the “observe, think, test, and revise” concept (GAO, 1990). As the primary investigator conducted daily reflection sessions, she tailored discussions around immediate issues that the students were facing on-site and planned focus group questions that attempted to gather more data in regards to the overall experience and other unanticipated experiences while on-site. The focus group was facilitated by another researcher not part of the experience to assure that responses during the focus group were honest and unbiased.

DATA ANALYSIS

The goals of collaborative learning directed the researchers to generate three analysis propositions that guided data analysis (Flood, Haslam, & Hocking, 2010). Proposition 1: Students engaged in a CLM will be self-directed. Proposition 2: Students engaged in a CLM will critically evaluate and reflect on practice. Proposition 3: Students engaged in a collaborative educational model will be goal oriented in order to maximize their experience.

Analysis was done manually by the two authors using the CLM as a foundation for code generation as the data were linked back to the propositions (Yin, 2013a; Yin, 2013b). An iterative process was used to progress from data to the final themes. The researchers used a constant comparative method to look inductively at what the participants were saying as individuals and as a group, with possible differences in interpretation highlighted in the final results and themes (Boeije, 2002; Glaser & Strauss, 1967; Wacker, 1998). At each step of the process, the researchers independently generated

their own codes and themes. They met at each phase of data analysis to compare notes and discuss the direction of the findings. At each meeting, the researchers challenged any interpretations that they generated on their own and developed consensus. First, topical codes were reviewed in the data as they related to the pre-determined propositions: *self-directed learning*, *evaluation and reflection on practice*, and *goal-oriented actions*. These topical codes were identified in individual cases followed by cross-case analysis to determine if the original propositions were congruent or incongruent with the data. Next, the researchers reviewed the data and observed for broader categories. They also re-visited the literature in regard to CLM and articulated how their data might confirm or refute the model or rule in or out alternative explanations about the student experience. In the last phase, analytic coding was used as the researchers decided how the topics could be viewed in broader concepts or themes that represented the student experience.

Since the primary investigator was also the faculty supervisor who led the experience, it was important to consider how the primary investigator's bias may have influenced the results. The researcher acknowledged this bias during analysis after the data were set aside for one year to minimize the interference of emotion tied to the experience.

Trustworthiness of the Data

Reliability of the data analysis was assured by the creation of a study protocol and a case study database. The case study database allowed for an 'audit trail' of the analysis process from data to generation of themes. It included supplementary material such as the journal reflection prompts and questions that guided the focus group. In addition, the database included data from all data sources and a diary that detailed the "minutes" of each meeting between the researchers. Dependability of the results was assured as the researchers independently developed themes and cross-checked them for commonalities and differences. Finally, member checking was used so that the research subjects could comment on the accuracy of the findings prior to finalizing themes. Once the two researchers generated themes and text of the results, the study participants were contacted via email with an invitation to review the themes for accuracy and any violation of confidentiality. Only one of the students provided substantive comments regarding the results. This participant's comments were taken into consideration in the final preparation of the manuscript.

RESULTS

Propositions

Based on the conceptual framework, the three propositions as presented above were re-visited during the analysis.

Proposition 1: Student is self-directed. The data revealed that the students recognized various needs in the classroom – from the perspectives of the children,

teachers, and other staff. They initiated activities based on need and adjusted their approach from day to day, depending on the circumstances. *“This week I expect... to show the teachers that there are much better ways to get the more [difficult] kids to cooperate”* (Participant J., journal entry, day one). Each evening, students worked on preparatory activities and practiced what they would do on the following work day with peers. The students expressed their desire to articulate the value of occupational therapy to the teachers. Students become more comfortable with their role as the week progressed and completed more activities with more self-direction.

Proposition 2: Student critically evaluates and reflects. The students reflected about the preschool environment and the local context, both socially and culturally. Students discussed their discomfort with different circumstances (for example, teachers not understanding the role of occupational therapy and behavioral concerns in the classroom) and discussed how they might adjust their behaviors accordingly. *“I think the most important thing is being able to adapt and kind of go with the flow, ‘cause like planning is great and everything, but you can’t plan what those preschoolers are gonna do or how the teachers will take what you are doing”* (Participant B., focus group comment). Students reflected on their relationships with the children, teachers, and support staff and how these relationships influenced their ability to do what they wanted in the classroom. *“My working relationship with teachers is developing a professional bond that is open to communicating struggles, success, and questions”* (Participant E., journal entry, day three). As the week progressed, students discussed their successes. *“I believe I have improved on my communication skills and adapting in unfamiliar situations”* (Participant H., journal entry, day four).

Proposition 3: Student is goal oriented. All the students identified personal and professional goals. Example goals included: understanding of developmental milestones in preschool aged children and improving evaluation skills. The students adjusted their goals to be more realistic in the time frame as the week progressed. Each goal became more realistic and logical given the circumstances that the students had encountered. Most of the students felt that their professional goals were met. Improvements included: *“observation skills, definitely, and then just working... collaborating with the teacher”* (Participant E., focus group comment). Some students reflected on their goals and what it meant for their future. *“I feel like I achieved my goals but there is still room for improvement”* (Participant G., journal entry, day four).

Themes

As propositions were analyzed for congruence with the data, the data was analyzed for themes. Four primary themes were discovered: *self-direction and reflection, limited supervision leads to uncertainty, development of confidence, and peer relationships make a difference.*

Theme I: Self direction and reflection. The students created reasonable goals and discussed their experience working towards those goals. Reflection allowed the students to adjust goals based on the immediate environment. Whether or not the preschool teachers were engaged and receptive of the occupational therapy students was another factor in the types of goals that the students created and the outcomes that they achieved. In order to improve their skills, students needed to recognize these issues amid other clinical conflicts and dilemmas (Binyamin, 2018) and make decisions that would benefit the children and their own clinical skills.

...at first, the teachers were saying we're not allowed to make [the children] engage in structured activities, so we just had to kind of explain [that the children] didn't have to do [the activity we planned]; it was an option. So when [the children] would see us doing it, like kids having fun, all the kids wanted to join. So it was a good thing, I think, for the teachers to see how well that can go, based on what activity you pick. (Participant F., journal entry, day three)

As the occupational therapy students recognized challenges and adjusted their approach, they began to see positive outcomes which gave them motivation to persist. The students quickly discovered that they had to take responsibility for their own learning and as they reflected on challenges, they learned in the process. Reflection allowed students to question their knowledge and practice, test potential strategies, and move forward (Binyamin, 2018).

I learned how to work my way through most of the classroom dynamics. I felt I was able to see if something was more of a sensory issue vs. a behavioral issue. I found myself coming up with multiple approaches and coming up with back-ups based on the feedback I was receiving. I was able to develop an understanding of where my weaknesses are in regards to dealing with this population. I also was able to develop a plan of action or identifying the resources I need when finding out information I was lacking in. (Participant J journal entry, day five)

Supervision and guidance helped students fine-tune their awareness of situations in context (Binyamin, 2018). As students had success throughout the experience, they changed their focus, with the assistance of the occupational therapy faculty supervisor, and celebrated “*small wins*” (Faculty-supervisor field notes, day four). Toward the end of the week, goals became focused on what would provide a lasting impact and help with carryover by the teachers. “*We have decided that leaving [the teachers] with handouts might work best with these teachers*” (Participant D., journal entry, day four). “*Some students shared contact information with the teachers*” to keep in touch after they returned home” (Faculty-supervisor field notes, day five).

Finally, through reflection, students in this experience considered how their professional identity and understanding of occupational therapy’s role was solidified during the experience (Boniface, Seymour, Polglase, Lawrie, & Clarke, 2012):

Prior to completing [this particular activity] I had a difficult time understanding why we did certain activities with the children. I questioned the therapeutic value and skilled service delivery of some interventions because I did not fully understand the theory behind it. During [this activity] I noticed some students struggle with the fine motor grasps and skills needed to stick the pretzels into the marshmallow and it was valuable to see the students [follow the model, then] make their own creative additions. This activity helped make OT theories 'click' for me. (Participant G., photovoice entry)

Theme 2: Limited supervision leads to uncertainty. The students expressed concerns with the amount of direct occupational therapy supervision that was provided throughout the week. Limited direct supervision seemed to impact their ability to communicate with other professionals. It was noted in group discussions early in the week, that the “*students are struggling with their role in the classroom*” (Faculty-supervisor field notes, day two). By the end of the week, there were still some difficulties with communication, but the instances were more individualized based on the teacher and student dyads involved. For example, “[*a student*] *is still having difficulty with communication with the primary teacher*” (Faculty-supervisor field notes, day four) but other student groups displayed an improvement with their professional role: “*Most of the students are feeling proud of the improvement they have seen with their roles and communication with the teachers*” (Faculty-supervisor field notes, day five).

Similar to findings from Boniface et al. (2012), students desired more preparation for the experience; in particular, more communication with the preschool teachers prior to arriving on-site: “*I think it would've been helpful to build rapport with the teachers prior to us going there*” (Participant A., focus group comment). However, preparation needed to be balanced with the uncertainty that would provide them with opportunities to be self-directed and creative. The ability to discuss the role of occupational therapy “*was definitely a challenge to try to explain what you were doing and what, [the teachers] didn't know what OTs were or anything, I think*” (Participant D., focus group comment).

Throughout the week, various students asked for more guidance from the occupational therapy supervisor outside of the structured group sessions. One student asked for guidance on how to best articulate the role of occupational therapy to the teachers (Faculty-supervisor field notes, day three) while another student pair were concerned about their understanding of interventions related to sensory processing (Faculty-supervisor field notes, days two and three). In addition, students asked for guidance when their peer group was not working as planned (Faculty-supervisor field notes, day three).

Interestingly, students were not entirely sure what more direct occupational therapy supervision might provide above and beyond their experience, but they were hopeful

that more supervision from the occupational therapy supervisor would provide guidance that they did not get during the experience.

I do wish that we had a supervisor there at times, maybe not all the time, but just so that she had a better idea of what we were working with and who knows? Maybe we could've gotten more insight or something. (Participant H., focus group comment)

Theme 3: Development of confidence. Uncertainties within the experience seemed to propel the occupational therapy students to be more independent, an occurrence that might not occur in a more traditional setting. As students worked in relative autonomy, they displayed more confidence in their clinical skills, thus increasing their self-efficacy (Mattila, Deluliis, & Cook, 2018). “[One student] stated that this experience was a ‘confidence booster’ since [they] were working without the help of an OT supervisor on site” (Faculty-supervisor field notes, day five). The increase in confidence and the ability to learn through trial and error was evident even after the experience: “We were able to do our own, like try our own things without following our supervisors’ every move, and learn from our own mistakes, and sometimes I feel like that’s how I learn the best” (Participant H., focus group comment). One student suggested that she “[did] not have to worry that an OT supervisor would tell her ‘no’” (Faculty-supervisor field notes, day five) to doing something new while another student suggested that “I feel that I can be more evidence-based because I don’t have the pressure to do what an OT supervisor might tell me to do” (Participant A., journal entry, day four). Once students had successes, the “successes made [them] feel good” (Participant A., journal entry, day five).

Students also discussed confidence as they reflected on the development of their clinical skills (Secomb, 2008).

I have noticed many improvements in my clinical skills. The first is my interactions with children. I learned how to interact with them and what skills they should be focusing on. I was not very interested in working with children in a school setting before this trip, but that has changed. The second is my ability to develop intervention ideas and execute them. I now feel comfortable observing children, identifying their needs, and figuring out how my skills can benefit them. (Participant B., journal entry, day four)

After the experience, students were even more positive about skills that had improved as a result of the experience: “Effectively communicating is another huge one that I think I definitely got more confidence with as the week went on” (Participant E., focus group comment). Again, perceived challenges led to improvements in self-efficacy (Mattila et al., 2018).

Theme 4: Peer relationships make a difference. Peer learning activities have been shown to increase the confidence of students in peer learning environments (Secomb,

2008). In most of the peer groups, fellow occupational therapy students provided a level of support that allowed the students to feel more comfortable with the uncertainty brought about by limited supervision. The peers provided observation opportunities that helped increase their knowledge of occupational therapy and about their role in the classroom (Binyamin, 2018). Being together in the experience enhanced the experience for many of the students by “*encourag[ing] each other to accomplish tasks [they were] uncomfortable with*” (Participant H., journal entry, day three). And, students learned new skills from each other:

During reflections, I feel like that’s really where we learned intervention skills and stuff from other people because they would have children, obviously, that had different issues in their classrooms than we did, and even the same issues, and then we could go practice these interventions the next day or any other techniques. (Participant B., focus group comment)

Peers observed each other perform tasks and were able to discuss problems with each other throughout the day without judgement. Peers were also able to provide reassurance to fellow peers (Daniels, 2010) since it helped reduce anxiety and gave them a way to talk through problems in the absence of direct fieldwork supervision.

I really benefited from having a partner in the classroom, ‘cause I was able, like people said, to see things she would do, get ideas off of her. We would pick up on different things, and it was nice to have a partner there for those moments like when you would ask a supervisor a question or something, we would be able to talk it out in the classroom and come up with a solution ourselves, and it was also nice ‘cause we could try things on our own without having to follow a supervisor, and they could kind of give you feedback for the, I don’t know, if you were collaborating with a teacher or working with a kid trying something out. (Participant G., focus group comment)

Incompatibility of students needs to be addressed on a case-by-case basis (Secomb, 2008) and in this intensive experience, incompatibilities may manifest more quickly than in a traditional week to week clinical experience. Student relationships were magnified by the close living quarters and the intensity of the experience as noted in the primary investigator’s field notes: “*Student peer groups appear to be more cohesive when talking about their days – they tend to finish each other’s sentences and provide more input and explanation when their partner is not expressing things well or needs help*” (Faculty-supervisor field notes, day three). One peer group did not provide as many positive comments related to their peer experience. For example, one of the group members suggested that “*my relationship with my partners is improving*” (Participant E., journal entry) when asked on day four. This was a day after a situation occurred the previous day within the peer group that was resolved.

Through discussions with the faculty-supervisor and peer interactions, the students discovered that their dilemmas were typical and legitimate (Binyamin, 2018).

So being able to like have all of my fellow students help us out to like talk about what happened, what they did, what they saw worked, what didn't work, tell their experiences going and seeing that not everything was like going so well for everyone was kind of like 'Okay, good. It's not just me that's like freaking out a little bit,' but, yeah, so collaboration with other students was really helpful for me. (Participant C., focus group comment)

Many of the students also recognized that they would not have this opportunity in other experiences: *"Having the opportunity to learn from other OT students probably isn't something I would get to experience on another practicum"* (Participant C., photovoice entry) which was seen as a positive aspect of the experience.

DISCUSSION

This case study explored the experience of students in a faculty-led Level I fieldwork that was developed using a CLM. The primary themes discovered in the data were supported by literature on CLM in both Level I and Level II fieldwork (Binyamin, 2018; Boniface et al., 2012; Daniels, 2010; Hanson & Deluliis, 2015; Mattila et al., 2018). Students were self-directed and benefitted from opportunities to reflect regularly on their experience. They became goal-driven as they developed goals and reflected on the achievement of their goals. As they reflected on their successes, they became more confident in their skills, which has been reported by others (Mattila et al., 2018). While the students expressed a normal desire for additional supervision from the fieldwork educator (Secomb, 2008), they overcame this discomfort through self-reflection and use of peers. The supervision structure, which relied on limited direct supervision and sessions in which problem-solving was completed as a group, facilitated a level of confidence that is not always seen with traditional apprenticeship model (1:1 supervision). Students regularly commented that they felt confident to try out new skills, *because of the limited direct supervision*. As student confidence increased, the concerns about direct supervision decreased and the students were more likely to help and accept help from their peers. The increase in self-confidence can be related to the experience of success or failure. The improvement in confidence as the experience progressed facilitated an eagerness to continue with the experience as designed. In addition, students appreciated that they could be more creative in their interventions as a result of the limited occupational therapy supervision and "learning through doing". Student participants had positive things to say about their peers and how their peer(s) were able to provide support and help solve clinical issues. Finally, students were able to observe their peers in clinical situations as an additional way to learn that is not always seen with traditional supervision.

Since the desired final outcomes in these types of experiences are both personal and professional growth of the occupational therapy student, over-preparation of the students may limit growth (Boniface et al., 2012). It is important to balance preparation with learning through experience (Boniface et al., 2012) and the CLM appears to

provide enough structure so that occupational therapy students can grow in practice without the desired direct supervision that is typical in Level I fieldwork. With that said, the way that the student groups are formed (self-selected versus faculty-supervisor facilitated selection) may influence the experience. In this experience, the faculty supervisor allowed students to provide their preferences, but made the final decision on peer groups. More research about the way that students are selected into peer groups (for example, whether it is beneficial to select students into peer groups by similar academic performance, learning style, or personality) may be important when trying to understand CLMs in occupational therapy. However, the skills needed in the workplace, including conflict resolution, adaptability, and working in a team, may be untapped skills that are learned in peer learning situations, especially in peer groups that are not self-selected. Perhaps peer selection is not as important as it might seem as long as the students learn group process and team skills during the preparation phase. This is worth exploring in future studies. In addition, it would be important to study different levels and types of supervisor contact and how supervision levels impact the student experience. There may be students who are not appropriate for this type of experience due to personality characteristics or previous course experience. For example, students who struggle with academic content might not be appropriate for this type of learning in context with limited direct supervision and this should be explored. Finally, the long-term trajectory of students who participate in such experiences may be important to consider in order to understand if professional trajectories benefit from participation in these types of experiences.

Since much of the literature on collaborative learning focuses on the student, and this study was no exception, in the future it would be important to study service recipient perceptions of occupational therapy intervention conducted in this manner. Examining the way that the students and faculty interact with service recipients and the impact this interaction has on the on-site staff and service recipients would be important to study as well. This would assure that all perspectives are taken into account when designing a faculty-led Level I fieldwork using a CLM.

Limitations

While construct validity was enhanced by multiple sources of evidence, cross checking, and collaboration during data analysis, the fact that this study examined a single Level I fieldwork involving a small number of students limits generalizability. In addition, this study was a unique experience for nine students and the first one developed by the primary investigator, as such, the circumstances may be difficult to replicate. Working in different systems of care or with different client groups might also influence the nature of the Level I fieldwork and its impact on the students. Finally, the faculty supervisor was also the primary investigator which might have influenced the results. Limiting access to the student data from the primary investigator until final grades were entered, and informing the students of this protection, was an attempt to reduce this bias.

Implications for Occupational Therapy Education

- When using a CLM to develop a Level I fieldwork experience, students should be instructed in the overarching goals behind CLM and peer learning prior to being immersed in such an experience. Students should be provided information about the clinical site and service recipients, but the students should not over-prepare such that spontaneous learning would be inhibited. However, faculty should prepare them for the environment and be sure that they understand assessment and intervention procedures unique to that environment. It would also be helpful for faculty to rehearse with students how to discuss the role of occupational therapy in that setting.
- Students should be encouraged to think of the clinical site as a vehicle for learning, but that they need to be self-directed to gain the most from the experience. It would be important that students develop goals for themselves and critically reflect on them at regular intervals while having a mechanism to problem-solve challenges and success along the way. Faculty should facilitate problem-solving in groups. Pre-clinical preparation can include goal development, practice of specific clinical skills, and practice working in peer groups.
- Faculty should prepare students to feel unsettled by the environment and be instructed to accept this as part of the learning process. However, they should also learn how to discriminate when more serious concerns should be communicated to the faculty-supervisor.
- Despite not having direct supervision, frequent communication between the student participants and the occupational therapy faculty-supervisor is important. The level and type of communication will depend on the goals for the experience and program-specific and objectives.

CONCLUSION

Development of faculty-led Level I fieldwork in occupational therapy will be more important as the profession moves towards enhanced community-based practice in non-traditional settings. Occupational therapists may find themselves in situations with more complex clients amid less supervision and mentoring. A faculty-led Level I fieldwork learning experience developed using a CLM can be beneficial to students who participate, despite the lack of direct occupational therapy supervision. A successful faculty-led experience can enhance student confidence despite their wish for more guided supervision by an occupational therapy supervisor. Mix of students and peer groups, occupational therapy faculty supervision levels, and perceptions of service recipients and non-OT supervisors should be explored further.

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