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Role Emerging Placements: Skills Development, Postgraduate Employment, and Career Pathways

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Abstract
Occupational therapy educators are increasingly using role emerging placements (REPs) as a forum for students to develop skills required to work in emerging areas of practice. This study explores the impact of REPs on skill development, postgraduate employment, and career pathways for occupational therapists. An online survey was sent to occupational therapists across Canada (n = 1,763). Occupational therapists who had completed a REP responded to the online survey (n = 88). Descriptive analysis was used to examine trends in the quantitative data, and content analysis was used to code categories derived from qualitative survey data. Results indicated five skills that developed in REPs and were used throughout an occupational therapist’s career. REPs appeared to have no impact on choice of practice field postgraduation, career pathways, or employment status. However, a group who identified their current job titles other than occupational therapy indicated a positive experience regarding their skills, career pathways, and employment status. Study results highlight the need to further understand the experiences of graduates in their REPs and the factors in REPs that may influence the career trajectory of occupational therapists.

Comments
The authors report they have no conflicts of interest to disclose.

Keywords
career pathways, fieldwork placement, nontraditional, occupational therapy, role emerging, skills development

Credentials Display
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It is well established in the literature that fieldwork placements are a fundamental component of education for occupational therapy students (Overton, Clark, & Thomas, 2009). The Canadian Association of Occupational Therapists’ (CAOT) accreditation standards require students to complete a minimum of 1,000 hrs of fieldwork (2012a). Fieldwork placements act as a bridge between theory and real-world applications for students to build their competencies, confidence, and skills to practice as effective and engaged occupational therapists (Casares, Bradley, Jaffe, & Lee, 2003).

There are two broad types of placements in which occupational therapy students can participate: traditional placements and role emerging placements (REPs). In traditional placements, students are placed with occupational therapists who have established roles in their organizations. These therapists supervise the students in practicing skills in these established roles. In REPs, the less common type of placement, students are placed in an organization where there is no established occupational therapy program or role. Students are supervised by an on-site non-occupational therapy supervisor and an off-site occupational therapy supervisor (Bossers, Cook, Platajko, & Laine, 1997). Even though REPs have been a part of practice education in North America since the 1970’s, there is limited research in this area (Bossers et al., 1997; Overton et al., 2009).

In recent years, the occupational therapy profession in Canada has experienced challenges to offering and securing fieldwork opportunities because of several factors evolving in the profession in Canada (CAOT, 2012a). Increased academic enrollment (Thomas, Penman, & Williamson, 2005), health and social system reform, changing client profiles and health status, growing professional knowledge base, the continued growth of private practice, and national and international mobility (CAOT, 2018), are all factors contributing to educators being required to think creatively and innovatively for fieldwork placement solutions (Klaiman, 2006). In 2006, Donna Klaiman, a previous director of policy and professional affairs of CAOT, stated that in the future, occupational therapists will need to work as “members of collaborative multidisciplinary teams” (p. 7) and will require the skills of collaboration and leadership, along with a focus on occupation, to address health. Klaiman (2006) predicted that innovations in electronics, material sciences, and biotechnology would stimulate the implementation of new practices, products, and services by the profession. To keep our profession relevant and at the forefront of these changes, occupational therapy programs are increasingly using REPs as a forum for their students to develop the skills required to work in emerging areas of practice (Dancza et al., 2013).

In several studies, students have highlighted the development of many skills during REPs, such as personal and professional growth and development, increased confidence working in multidisciplinary teams, resource and time management, communication skills, enhanced understanding of their professional identity, clinical reasoning, and evidence-based practice, along with increased empowerment and autonomy (Bazyk, Glorioso, Gordon, Haines, & Percaciante, 2010; Bossers et al., 1997; Friedland, Polatajko, & Gage, 2001; Thew, Hargreaves, & Cronin-Davis, 2008). In 1985, Christie, Joyce, and Moeller surveyed occupational therapists in all areas of practice throughout the United States and found fieldwork placements had the greatest influence on their development of a preference for a specific area of clinical practice. This finding was further supported by an Australian study (Crowe & Mackenzie, 2002) suggesting that fieldwork placements have a strong influence on practice preferences, and that students are most likely to work in a clinical area in which they have had the most fieldwork experience. These findings demonstrate the need for developing fieldwork placements in emerging areas of practice where potential for growth in the profession is anticipated (Crowe & Mackenzie, 2002).
However, little has been done to explore occupational therapy graduates’ experiences of their placements once they are working and how the placement experiences have influenced their postgraduate employment and career paths (Clarke, de-Visser, Martin, & Sadlo, 2014; Friedland et al., 2001). This limitation has been acknowledged by many authors in this area of research (Bossers et al., 1997; Casares et al., 2003; Clarke, Martin, de-Visser, & Sadlo, 2015; Dancza et al., 2013; Friedland et al., 2001; Overton et al., 2009).

By asking occupational therapists to reflect on their experiences in their REPs, this study seeks to understand the impact of such placements on skill development during their REPs, on postgraduate employment, and on career pathways. These findings may help to inform educators, administrators, and occupational therapy advocates about the impact REPs have on the future practice contexts for occupational therapists and provide further insight into alternative occupational therapy education and emerging practice.

**Method**

**Participants**

The participants were recruited through convenience sampling using the CAOT list serve. The inclusion criteria required the participants to have completed at least one REP in Canada during their occupational therapy program, to have graduated from their program, and to have obtained either a Bachelor of Science in Occupational Therapy or a Master of Science in Occupational Therapy from a Canadian University. The participants were also required to be employed, at a minimum, in their first jobs. In addition, the participants had to be able to complete the survey in English. The participants were all members of the CAOT and had indicated on their most recent registration their interests in participating in research studies. The CAOT list serve was chosen to represent the varied practice contexts in which occupational therapists completed their REPs and are currently employed in Canada.

**Instrumentation**

The primary researcher designed the survey with the focus of answering the overall research question (see Appendix). The survey was designed using the SurveyMonkey website (https://www.surveymonkey.net). The survey used a combination of drop down, multiple choice, 5-point Likert scale, and open-ended questions. Logic options were applied to some questions in the survey to guide the respondents to sections and questions further in the survey depending on how they answered the close-ended questions. Questions about roles and skills were chosen based on the 2012 Profile of Practice of Occupational Therapists in Canada (CAOT, 2012b). Items pertaining to areas of practice for REPs and initial employment corresponded to those listed in the Occupational Therapists 2014 table on the Canadian Institute for Health Information (CIHI) website (CIHI, 2014).

**Procedures**

Institutional ethics review board approval of the study was received from the University of Toronto. The CAOT was contacted to provide a list serve of their members who had indicated in their annual memberships that they would be interested in participating in research studies. A recruitment email was sent out, and occupational therapists who chose to participate clicked on the link in the email letter, which brought them to the SurveyMonkey website. They provided their consent to participate in the study before proceeding to the survey. CAOT members (n = 1,763 who had indicated interest in participating in research) received an email request to participate in the study and 88 responded. On review of the survey responses, 14 surveys were excluded for the following reasons: eight of the respondents who had consented to complete the survey were unable to proceed after they answered “no”
to Question 1, which asked if they had completed a REP during their occupational therapy program; five of the respondents consented to participate in the survey but did not complete any of the proceeding questions; and one respondent completed the survey but stated in one of the open-ended questions that he or she was not employed at the time of taking the survey, and current employment was an inclusion criteria outlined in the recruitment email.

To preserve the participants’ confidentiality, no personal identifying information was collected. All data were downloaded from SurveyMonkey and entered into Excel version 16 and analyzed using this software. Data were either aggregated or individually analyzed depending on the questions asked and the results required.

**Data Analysis**

Descriptive quantitative analysis methods were applied to examine trends in the data, and conventional content analysis methods were used to code categories derived directly from the text data (Portney & Watkins, 2015).

**Results**

**Participant Characteristics**

The study included the survey results of 74 respondents who graduated from 11 occupational therapy programs in Canada. The participant sample (n = 74) had the following characteristics: 76% of the respondents graduated with a master’s degree in occupational therapy, 23% graduated with a bachelor’s degree in occupational therapy, and one respondent left this question blank. The majority of the respondents (81%) graduated in the last 10 years, with the largest response rate from those who had graduated in 2016 (n = 21). Over 50% of the respondents graduated from three different universities: Dalhousie University (n = 10), Queen’s University (n = 18), and the University of Alberta (n = 15); and 84% of the respondents completed their REPs in Level II (150 – 600 hr of fieldwork) or Level III (600-1000+ hrs of fieldwork) placements.

It should be noted that not all of the participants answered all of the survey questions. Where a respondent skipped a question, the researcher will specify the respondent number in reporting of the results. Where a respondent number is not provided, the reader can assume that all 74 participants responded to the question.

Although the researchers noted differences between the occupational therapists who had graduated with a bachelor’s degree versus those who had graduated with a master’s degree, we chose not to further stratify the participant sample, as it would remove statistical significance and lose fidelity of the results due to the small number of respondents.

**Skills: Development, Marketability, and Current Use**

Three questions in the survey specifically pertained to occupational therapy skills (see Questions 8, 15, and 18 in the Appendix). A choice of 27 requisite skills, based on the 2012 Profile of Practice of Occupational Therapists in Canada (CAOT, 2012b), was provided for respondents to identify which skills they believe they developed during their REPs, the ones that made them marketable in getting their first jobs, and the ones they continue to use in their current practices. It is interesting to note that the same five skills ranked in the top five over the career of an occupational therapist, from student to practice: client-centered and therapeutic relationship, team consultation/collaboration, advocacy, critical thinking, and time management (see Figure 1). The skill of autonomy was the one skill that ranked in the top five for development in REPs and as being used in current practice but that did not rank in the top five for marketability of a new graduate.
The results indicated that 55% (n = 41) of the respondents believed the skills they developed during their REPs made them marketable in securing their first jobs, and 45% (n = 33) of the respondents believed they did not. Additional placement experience/occupational therapy education was the other primary factor that helped this group of respondents (n = 30) secure their first jobs. Of the 73 respondents who answered Question 17, which asked them about using the skills they developed during their REPs in their current positions, 75% (n = 55) indicated yes, that they continue to use the skills they developed in their REPs in their current practices. However, of the remaining 25% (n = 17) who reported not continuing to use those skills, 76% (n = 13) believed the reason for this was minimal skill/OT skill development during their REPs.

**Postgraduate**

**Practice settings.** The respondents were provided with 10 choices for areas of practice for REPs and postgraduate employment based on practice settings listed in the Occupational Therapists, 2014 table on the CIHI website (CIHI, 2014). They were asked to pick as many areas of practice that applied to their REPs and postgraduate employment experiences (see Questions 6 and 12 in the Appendix). Most of the participants chose three or more practice areas for both their REPs and their first jobs; therefore, the distribution of practice contexts exceeded 100%. The results for REPs showed that 53% of the REPs were identified as having a mental health practice context, followed by health promotion and wellness (34%) and physical health (33%).

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*Figure 1. Top five skills: Role emerging placement, marketability, and current use.*
The participants indicated that 68% of their first jobs had a physical health practice context, followed by mental health (36%), vocational rehabilitation, and other (12%). As illustrated in Figure 2, the results showed that even though a higher percentage of REPs in occupational therapy programs were offered in the context of mental health practice, new graduates were more likely to be hired in jobs that were in the context of physical health practice. This finding was further supported by the results of Question 13, which asked the respondents if their REPs influenced the areas of practice in which they obtained their first jobs. This question was answered by 72 of the respondents, of which 71% (n = 51) indicated that their REPs did not influence the areas of practice in which they obtained their first jobs.

**Figure 2. Areas of practice: REP versus first job.**

**Employment.** A large majority (90.5%) of the respondents who completed a REP were employed within 6 months of graduating from their occupational therapy programs. The respondents who indicated that their REPs were in the context of mental health practice or other had the highest rate
of hiring within 6 months (92%) compared to new graduates who indicated that their REPs had a vocational rehabilitation practice context, which had the lowest hiring rate of hiring within 6 months (80%) (see Figure 3). The results also showed that regardless of whether they believed their skills made them marketable, they were hired within 6 months of graduating from their programs. Of the 73 respondents who answered Question 11 (see Appendix) about being hired into their first jobs, 92% (n = 67) stated that their first job title was occupational therapist. It is interesting to note that 92% of the respondents also indicated they did not get hired into their REPs after graduation.

![Employed Within 6 months Postgraduation](https://scholarworks.wmich.edu/ojot/vol7/iss1/12)

*Figure 3. Areas of practice of REP and employment.*

In summary, these results show that regardless of the area of practice in which the occupational therapy students completed their REPs, and regardless of whether they believed the skills developed in their REPs made them marketable or not, most of them were hired into occupational therapy positions with a physical health practice context within 6 months of graduating; however, not in the organization in which they did their REPs.

**Current Career Pathway and/or Position**

At the time that the respondents took this survey, 55% (n = 41) stated they had moved on from their first jobs, and 45% (n = 33) indicated they were still in their first jobs. Of the 45% who were still in their first jobs, 58% (n = 19) graduated from their occupational therapy programs in the past year (in 2016), with the remaining respondents graduating in the past 6 years (2011 to 2015).

Of the 55% (n = 41) who indicated that they had moved on from their first jobs, 70% (n = 29) stated that their job titles continued to be occupational therapist in their current areas of employment, and 61% (n = 25) believed that their REPs did not influence their current career pathways and/or positions, identifying factors such as previous experience (i.e., other placement/work), interest in a particular field, or lack of job availability in a particular area, as the factors that did.

Of the 70% (n = 29) of the respondents who stated that their current job titles continued to be occupational therapist, there was a 49% (n = 14) to 51% (n = 15) split in favor of those who believed that the skills developed in their REPs did not make them marketable when being hired in their first jobs; 70% (n = 20) believed that their REPs did not influence their current career pathways and/or positions; 48% (n = 14) believed their REPs did not make a difference in their current employment status; 45% (n = 13) believed they were at the same level of their peers, and 7% (n = 2) believed they
were above the level of their peers who did not do a REP during their occupational therapy program (see Figure 4).

Of the 55% (n = 41) who indicated that they had moved on from their first jobs, 30% (n = 12) indicated their current job titles to be “other” instead of occupational therapist. Examples of the “other” job titles were PhD candidate, faculty member, director of services, learning strategist, and counselor. This group of respondents indicated a more positive experience regarding their skills, career pathways, and current employment status in the context of their REP experiences. Results from this group demonstrated a belief that the skills they developed during their REPs helped them secure their first jobs (75%, n = 9), and they continue to use these skills in their current practices (92%, n = 11). Also, 58% (n = 7) believed their REPs influenced their current career pathways and/or positions. Current employment status results for this group showed 33% (n = 4) believed they are above the level of their peers who did not do a REP, 25% (n = 3) believed they are at the same level, and 33% (n = 4) believed their REPs did not make a difference in the level of employment status they are at currently (see Figure 4).

![Employment Status](image)

**Figure 4.** Employment status: OT versus other job titles.

**Discussion**

The study results indicated there are five skills that develop in REPs and are used from student to practitioner. These results are supported by previous studies in which occupational therapy students disclosed that through experiencing the independence and challenges of REPs, they were afforded the opportunity to think critically, thus enabling them to apply theory to unique practice settings and situations; collaborate with team members and clients who may not understand their roles; advocate for the potential of occupational therapy in non-occupational therapy environments; and organize their work and manage their time and resources effectively and independently (Dancza et al., 2013). Further, decreased constraints in such placements allowed them to work in a more client-centered way and to form therapeutic relationships with their clients (Clarke, Martin, Sadlo, & de-Visser, 2014). Based on the results of this study, these skills are the same ones that also assist new graduates in being hired and that are continued to be used in current practice.

In a study done by Bossers et al. (1997), students who completed REPs stated that the inherent feature of independence in such placements provided them the opportunity to be self-directed learners, enabling them to problem solve and develop ideas. Bossers et al. (1997) stated that “the students seemed
liberated and empowered” (p. 76) in the flexible structure of such placements. This concurs with the findings of this current study, in which the skill of autonomy was identified as one of the top five skills developed in REPs along with its continued use in current practice. However, autonomy was not identified as a skill that new graduates used for marketability in obtaining their first jobs. In 2000, The Conference Board of Canada published the employability skills needed to participate and progress in today’s dynamic markets. It identified teamwork skills as one of three sets of critical skills needed in the workplace, regardless of whether you are self-employed or working for others. In a study done by Mulholland and Derdall (2004), in which they surveyed employers in Alberta and Saskatchewan who hire occupational therapists, it was found that team skills were one of the most frequently cited attributes identified by employers when hiring occupational therapists. This suggests that the skill of being a team player is more valued by employers when hiring than the skill of being autonomous.

Even though the overall results of this study illustrated that the skills developed in REPs helped new graduates be marketable in securing their first jobs, there was a group of respondents who believed that their occupational therapy education and other placements, not the skills developed in their REPs, helped them obtain their first jobs. This support the Friedland et al. (2001) study, which found that students who were close to graduating did not value the skills they developed in their community placements to the same degree that they valued their clinical skills and believed that by doing such a placement they had lost an opportunity to develop the essential clinical skills required for future employment.

The results of this study also showed that the area of practice for REPs was not necessarily the area of practice in which occupational therapists found their first jobs. The majority of the respondents reported that their REPs had a mental health practice context; however, at graduation, most them were hired into jobs defined by the physical health practice context. According to the 2015 CIHI statistics, most occupational therapists in Canada are working in the physical health area of practice as compared to mental health and other areas (51.6% vs. 11.3%). A study done in Australia by McKenna, Scholtes, Fleming, and Gilbert (2001) found clinical placements had the greatest influence on career decisions for students exiting the program. In another study done in Australia by Crowe and Mackenzie (2002), it was found that having a positive or negative experience in a placement had a significant impact on future practice choices for occupational therapists. Taking the findings of both studies into consideration along with the findings of this study, it could be speculated that the respondents may not have had a positive experience in their REPs, and thus chose areas of practice differing from their placements. It could also be that the Canadian job market for occupational therapists has more positions defined by the physical health area of practice than mental health. Crowe and Mackenzie (2002) also pointed out that students were most likely to work in a clinical area in which they have had the most fieldwork experience. This survey did not ask the respondents about the areas of practice of their other placements in their occupational therapy programs, which could have also influenced their choices postgraduation. Thus, further exploration is warranted to understand the factors that influence occupational therapy graduates in searching for jobs or getting hired in areas of practice different from their REPs.

Of note is that few of the graduates were hired by their REP organizations. This is contrary to the findings of a survey done in Australia by Thomas, Penman, and Williamson (2005) and reported on by Rodger et al. (2007). Rodger et al. highlighted a survey finding that revealed a clear link between fieldwork placements with future staff recruitment. Employers identified the benefits of hiring past students as already knowing their skill and knowledge levels along with their work ethics and style.
Reasons for this study’s findings could be that the role emerging organization may not have fully understood and appreciated the role of occupational therapy in their organizations, and thus not hired previous students. A lack of funding for an occupational therapy position in the organization could also have been a factor impeding hiring of the student. Post-fieldwork meetings between the off-site occupational therapy supervisor or fieldwork coordinator, the student, and the on-site non-occupational therapy supervisor (or organization management) may be a way to further clarify the role of occupational therapy in their organizations and to highlight the ongoing benefits to their clients and organizations by hiring one. For future consideration, a study exploring organizations who offer REP but do not hire graduates would allow for a deeper understanding of the factors that impede them from doing so.

According to the 2015 CIHI statistics, 93.9% of occupational therapists in Canada are currently employed. This high percentage of employment supports the findings of this study, where the majority of the respondents reported being hired within 6 months of graduation, despite the areas of practice of their REPS and despite their belief in the marketability of their developed skills. This is an encouraging finding for current occupational therapy students who will be graduating soon and for people contemplating this profession as a career. It is also a positive indicator for educators, as they can demonstrate a demand for occupational therapy professionals in the job market, thus justifying further funding requests for occupational therapy programs.

A finding that surprised the researchers was that a majority of the respondents indicated that they continue to have the job title of occupational therapist in their current organizations, despite most of them moving on from their first jobs. Prior to this survey, the researchers hypothesized that a higher number of graduates (new and not-so new) would indicate job titles other than occupational therapist, since having the experience of a REP during their occupational therapy program may have empowered them to think nontraditionally and encouraged them to seek out employment in emerging areas of practice. A study done by James and Prigg (2004) found that students who had done alternative occupational health placements reported having difficulty with transferring the generic skills (such as time management and communication skills) to other settings. It was suggested that students receive specific guidance in understanding the relevance of generic skills for use in other areas of practice. The findings of this study may suggest that occupational therapists may struggle to market their skill sets to emerging positions, thus continuing in role established positions throughout their careers. Occupational therapy educators may need to consider building capacity in their programs to provide students with knowledge on the transferability of the skills they develop to different settings, thus providing them with the resources to market themselves successfully and instilling confidence to seek out unique career paths.

The overall results of this study showed that the majority of the occupational therapists who completed the survey believed that the REP did not make a difference in their current employment status, followed closely by occupational therapists who believed their current employment status was at the same level of their peers who did not complete a REP in their programs. However, there appeared to be a distinct delineation in REPs playing a factor in career pathways and employment status between occupational therapists who reported their current job titles of occupational therapists and ones who reported other job titles. The respondents who had moved on from their first jobs and identified that their current job title continues to be occupational therapist overwhelmingly believed that their REPs did not influence their current career pathways and/or position and considered their REPs as inconsequential to
their current employment status. It could be that since these respondents continue to maintain the job title of occupational therapist, they viewed their REP experiences as a lost opportunity, instead of one that expanded their repertoire of skills and career prospects, and that they viewed their current career progression as at a standstill, therefore having an overall negative perception of their REP experiences and where they are in their careers currently.

At the other end of the spectrum, there was a group of respondents who have moved on from their first jobs and have current job titles other than occupational therapist. These respondents indicated a more positive experience regarding their skills, career pathways, and current employment status in the context of their REP experiences. They showed a strong belief that the skills they developed during their REPs helped them secure their first jobs, and they continue to use these skills in their current practices. A majority of them also believed that their current employment status was either at or above that of their peers who did not complete a REP during their occupational therapy programs.

This discrepancy between the two groups of respondents and their opposing reflections on their experiences of their REPs and its influences is supported by the findings of Clarke et al. (2015). Clarke et al. found that the graduates in their study credited their REPs for enhancing their sense of professional identity as an occupational therapist. On receiving employment, the ones who continued in REPs sustained this sense of identity and thus provided positive reflection of their REP experiences. However, the ones who were employed in traditional settings voiced frustration and disappointment at the lack of opportunities to reflect the professional identity they had developed in their placements. Taking into consideration the findings of this current study and that of Clarke et al., it may be speculated that the ones who have progressed in their careers or into emerging areas of practice view their REP experiences and career progression and status in a more positive light, and thus may be more confident in seizing career opportunities outside of the traditional occupational therapy realm.

The findings of this current study demonstrate the need to further understand the experiences of these two groups of respondents in their REPs to identify factors that may be influencing their opposing perceptions of their REP experiences. More importantly, a study investigating the experiences of the respondents who reported other job titles should be undertaken to identify factors in their REPs that may have contributed to their current career pathways in emerging areas of practice.

**Limitations**

A selection bias in this study is assumed; the respondents who chose to participate in this study may differ from those who did not, such as having stronger feelings about their REP experiences that they were motivated to share or being more engaged with the topic of REP. The generalizability of the findings is limited due to the small response rate. Additional study limitations include not pilot testing the survey, not including international REPs, not considering members of CAOT who did not indicate interest in participating in research studies or occupational therapists who are not members of CAOT, and excluding respondents who were not working at the time the survey was administered.

**Conclusion**

The purpose of this study was to understand if REPs have an impact on students’ skill development during their REPs, postgraduate employment, and career pathways. This study indicated that there are five skills that students develop during their REPs: client-centered and therapeutic relationships, team consultation and collaboration, advocacy, critical thinking, and time management. These are the same skills that help graduates obtain their first jobs and that they continue to use in their current practices. Autonomy is identified as a skill that develops and is continued to be used in current
practice; however, it is not considered as a marketable skill for graduates to obtain their first jobs. The results of this study showed that overall, REPs do not influence the area of practice of first jobs or make a difference in current employment status. They also do not play a factor in influencing career pathways for occupational therapists who have moved on from their first jobs. These findings indicated that there are other factors at play when career decisions are being made. There was a group in this study who moved on from their first jobs and who stated that their current job titles are not occupational therapist. This group indicated a more positive experience regarding their skills, career pathways, and current employment status in the context of their REP experiences. The placement experiences of this group needs to be further explored to understand the extent to which their REPs played a factor in where they are today and what other factors may have influenced their career pathways into emerging areas of practice. This study contributes to the literature on REPs, and the results inform fieldwork educators of the ongoing need to develop placements in emerging areas of practice to provide students with diverse learning experiences and to advocate for the profession of occupational therapy in areas of practice with limited exposure to the profession (A. Duncan, personal communication, June 9, 2017).

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Andrea Duncan, OT Reg. (Ont.), MBA, is an occupational therapist who maintains a core faculty position in the Department of Occupational Science and Occupational Therapy at University of Toronto. She has championed unique and exciting role emerging fieldwork opportunities for students. Andrea’s research is focused on strategic business development for health care, health care market analysis, disability management, workplace wellness, and knowledge translation in role emerging learning environments.

References


Appendix

Survey Questions

1. Did you complete a role emerging placement during your BSc or Master Occupational Therapy program? Definition: role emerging placement is a placement at an organization in which there is no established occupational therapy program or role and the student(s) is supervised by an on-site non-OT supervisor and an off-site OT supervisor. While the organization may consult with OTs from time to time, there are no regular FTE’s.
   a. Yes - continue survey
   b. No - thank you very much, you do not need to complete this survey

2. Did you graduate with a (please choose one):
   a. BSc. OT degree
   b. Masters OT degree

3. Which Canadian University OT program did you graduate from? (drop down menu of OT programs in Canada)

4. What year did you graduate from the program? (drop down menu)

5. In which fieldwork level did you complete the role emerging placement?
   a. Level 1 - Less than 150 hours of fieldwork
   b. Level 2 - 150-600 hours of fieldwork
   c. Level 3 - 600-1000+ hours of fieldwork
   d. I do not recall

6. In which area of practice was your role emerging placement? (drop down menu)
   Mental health
   Physical health (neurological, musculoskeletal, cardiovascular, respiratory, digestive/metabolic/endocrine, and general physical health)
   Vocational rehabilitation
   Palliative care
   Health promotion and wellness
   Client service management
   Medical/legal
   Service administration
   Teaching and research
   Other (specify):

7. Considering the Profile of Practice of Occupational Therapists in Canada (CAOT, 2012b), rank the roles which you believe you developed in your role emerging placement. (1 = no development to 5 = exceptional development). Definitions for each role are provided.

   Expert in Enabling Occupation - use of evidence-based processes that focus on a client’s occupations - including self-care, productive pursuits, and leisure - as a medium for action and an outcome. Clients include individuals, families, groups, communities, populations, or organizations.

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Professional - committed to ethical practice and high personal standards of behavior in enabling occupation.

Communicator- the practitioner-client relationship is central. Communication includes oral, written, nonverbal, and electronic means.

Scholarly Practitioner - incorporation of critique, reflection, and quality improvement in everyday practice and through lifelong learning. As educators facilitating learning with clients, team members, and other learners.

Collaborator - working effectively with key stakeholders to enable participation in occupations by using and promoting shared decision-making approaches.

Change Agent - use of expertise and influence responsibly to advance occupation, occupational performance, and occupational engagement.

Practice Manager - managing time, prioritizing, and supporting the management of effective and efficient practice.

8. Each of the seven roles in the Profile of Practice of Occupational Therapists in Canada (CAOT, 2012b) contains several requisite skills expected throughout an occupational therapist’s career. Select ALL the skills you believe you developed during the role emerging placement.

- Client centeredness and therapeutic relationship
- Advocacy
- Team consultation/collaboration
- Mediation, Negotiation, and Conflict Resolution
- Assessment
- Interview
- Treatment plan development and monitoring
- Discharge planning
- Professional development
- Occupational enabling and engagement
- Critical thinking
- Adaptive communication
- Verbal and Written communication
- Time management
- Financial management
- Quality improvement
- Leadership and Supervision
- Evaluation and Evidence-Based Practice
- Case management
- Presentation skills
- Knowledge integration
- Teaching skills
- Ethical practice
- Maintaining professional boundaries
- Competent practice
- Cultural sensitivity
9. Within 6 months of graduation, did you obtain an employed position?
   a. Yes
   b. No

10. Were you hired into your role emerging placement after graduation?
    a. Yes
    b. No

11. What was/is your position/title in your first job? (open-ended)

12. In which area of practice was/is your first job? Select ALL areas of practice that apply (drop down menu)

   Mental health
   Physical health (neurological, musculoskeletal, cardiovascular, respiratory, digestive/metabolic/endocrine, and general physical health)
   Vocational rehabilitation
   Palliative care
   Health promotion and wellness
   Client service management
   Medical/legal
   Service administration
   Teaching and research
   Other (specify):

13. Did your role emerging placement influence the area of practice you obtained your first job in?
    a. Yes
    b. No

14. Did the skills you developed during your role emerging placement make you marketable in securing your first job?
    a. Yes - proceed to next question
    b. No - proceed to question #16

15. If yes, please identify which skill(s) you believe made you marketable in securing your first job? Select ALL that apply.

   Client centeredness and therapeutic relationship
   Advocacy
   Team consultation/collaboration
   Mediation, Negotiation, and Conflict Resolution
   Assessment
   Interview
   Treatment plan development and monitoring
   Discharge planning
   Professional development
   Occupational enabling and engagement
Critical thinking
Adaptive communication
Verbal and Written communication
Time management
Financial management
Quality improvement
Leadership and Supervision
Evaluation and Evidence-Based Practice
Case management
Presentation skills
Knowledge integration
Teaching skills
Ethical practice
Maintaining professional boundaries
Competent practice
Cultural sensitivity
Autonomy

16. If no, please explain what helped you to secure your first job. (open-ended)

17. Are you utilizing the skills you developed in the role emerging placement in your current position?
   a. Yes - proceed to next question #18
   b. No - proceed to question # 19

18. If yes, please identify which skills you believe you continue to use in your current position. Select ALL that apply.

   Client centeredness and therapeutic relationship
   Advocacy
   Team consultation/collaboration
   Mediation, Negotiation, and Conflict Resolution
   Assessment
   Interview
   Treatment plan development and monitoring
   Discharge planning
   Professional development
   Occupational enabling and engagement
   Critical thinking
   Adaptive communication
   Verbal and Written communication
   Time management
   Financial management
   Quality improvement
   Leadership and Supervision
   Evaluation and Evidence-Based Practice
   Case management
   Presentation skills
   Knowledge integration
   Teaching skills
Ethical practice
Maintaining professional boundaries
Competent practice
Cultural sensitivity
Autonomy

19. If you are not currently utilizing the skills you developed in your role emerging placement, please explain the reasons why not? (open-ended)

20. Are you still in your first job?
   a. Yes - proceed to question #24
   b. No - proceed to next question #21

21. What is your current position/title in your organization? (open-ended)

22. Did your role emerging placement influence your current career pathway and/or position?
   a. Yes
   b. No

23. Are there any other factors that influenced your current career pathway and/or position? (open-ended)

24. Do you consider your current employment status:
   a. at the same level as your peers who did not complete a role emerging placement
   b. above the level of your peers who did not complete a role emerging placement
   c. below the level of your peers who did not complete a role emerging placement
   d. your role emerging placement did not make a difference in your current employment status

25. Considering the Profile of Practice of Occupational Therapists in Canada (CAOT, 2012b), which of the roles do you believe you utilize the MOST in your current position? Select no more than THREE roles that apply. Definitions for each role are provided.

   Expert in Enabling Occupation - use of evidence-based processes that focus on a client’s occupations - including self-care, productive pursuits, and leisure - as a medium for action and outcome. Clients include individuals, families, groups, communities, populations, or organizations.

   Professional - committed to ethical practice and high personal standards of behaviour in enabling occupation.

   Communicator- the practitioner-client relationship is central. Communication includes oral, written, nonverbal, and electronic means.

   Scholarly Practitioner - incorporation of critique, reflection, and quality improvement in everyday practice and through lifelong learning. As educators facilitating learning with clients, team members, and other learners.

   Collaborator - working effectively with key stakeholders to enable participation in occupations by using and promoting shared decision-making approaches.
Change Agent - use of expertise and influence responsibly to advance occupation, occupational performance, and occupational engagement.

Practice Manager - managing time, prioritizing, and supporting the management of effective and efficient practice.