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A Report of an Internship in the National Office of the American Occupational Therapy Association

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**A REPORT OF AN INTERNSHIP IN THE NATIONAL OFFICE OF THE
AMERICAN OCCUPATIONAL THERAPY ASSOCIATION**

by

Claire Callan

**A Project Report
Submitted to the
Faculty of The Graduate College
in partial fulfillment of the
requirements for the
Degree of Specialist in Education
Department of Educational Leadership**

**Western Michigan University
Kalamazoo, Michigan
August 1983**

A REPORT OF AN INTERNSHIP IN THE NATIONAL OFFICE OF THE
AMERICAN OCCUPATIONAL THERAPY ASSOCIATION

Claire Callan, Ed.S.

Western Michigan University, 1983 ,

This report describes an internship of six weeks, completed by a candidate for a graduate degree in educational leadership, in the educational division of a professional organization (the American Occupational Therapy Association). The plan for the internship is presented; and the host organization is described. The experience is summarized, and it is analyzed from a variety of perspectives.

A central concern of the internship consisted of the development of a training unit for the purpose of assisting clinical educators to improve their skills as supervisors of occupational therapy students. Problems encountered in the development of this unit, and the solutions that were attempted, are described and are illustrated by three successive drafts of the training unit materials.

The roles and responsibilities of the various leaders of the staff of the American Occupational Therapy Association are described also. The leadership styles of several are discussed.

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INTRODUCTION

This report is submitted in partial fulfillment of requirements for a Specialist degree in Education at Western Michigan University. The degree, taken in the Department of Educational Leadership, requires either a field project or a practical experience in an organization or agency. This report describes and analyzes a fieldwork experience taken for six hours of academic credit.

A practical experience, rather than a field project, was chosen as better suited to my professional goals at the time. As I became more interested in administration, coordination and supervision, an experience in an organization at an administrative level, appeared to be more meaningful than a project. In addition, the organization selected provided me with a unique and valuable opportunity.

As a member of the faculty of the Occupational Therapy Department of Western Michigan University, the most obvious sites for a practical experience were either a clinical or an academic department. However, a third option that presented itself was an experience in a professional organization. I was able to complete the internship in the Division of Education of the American Occupational Therapy Association at its headquarters in Rockville MD, outside Washington D.C., from May 3 to June

10, 1983. My supervisor was the Director of the Division of Education, Stephanie Pressler, MS, OTR, hereafter referred to as the Division Director.

The Association

A brief depiction of the organizational scheme of the American Occupational Therapy Association (AOTA) at the time of the internship will help to clarify the report which follows. Membership in AOTA was then open to all certified occupational therapists and occupational therapy assistants in the United States. Members, referred to as the volunteer sector, elected delegates to a Representative Assembly. The Representative Assembly considered recommendations and reports from various advisory boards and commissions, and presented charges to the Executive Board. The Executive Board worked directly with the Executive Director of the Association.

The Association staff, which only recently had been reorganized, was divided into three departments: Professional Services, Finance and Business, and Member Services and Association Development, with each department sub-divided into several divisions (see Figure 1, p. 3).

All divisions within the Department of Professional Services were staffed primarily by occupational therapists. The three professional staff members of the

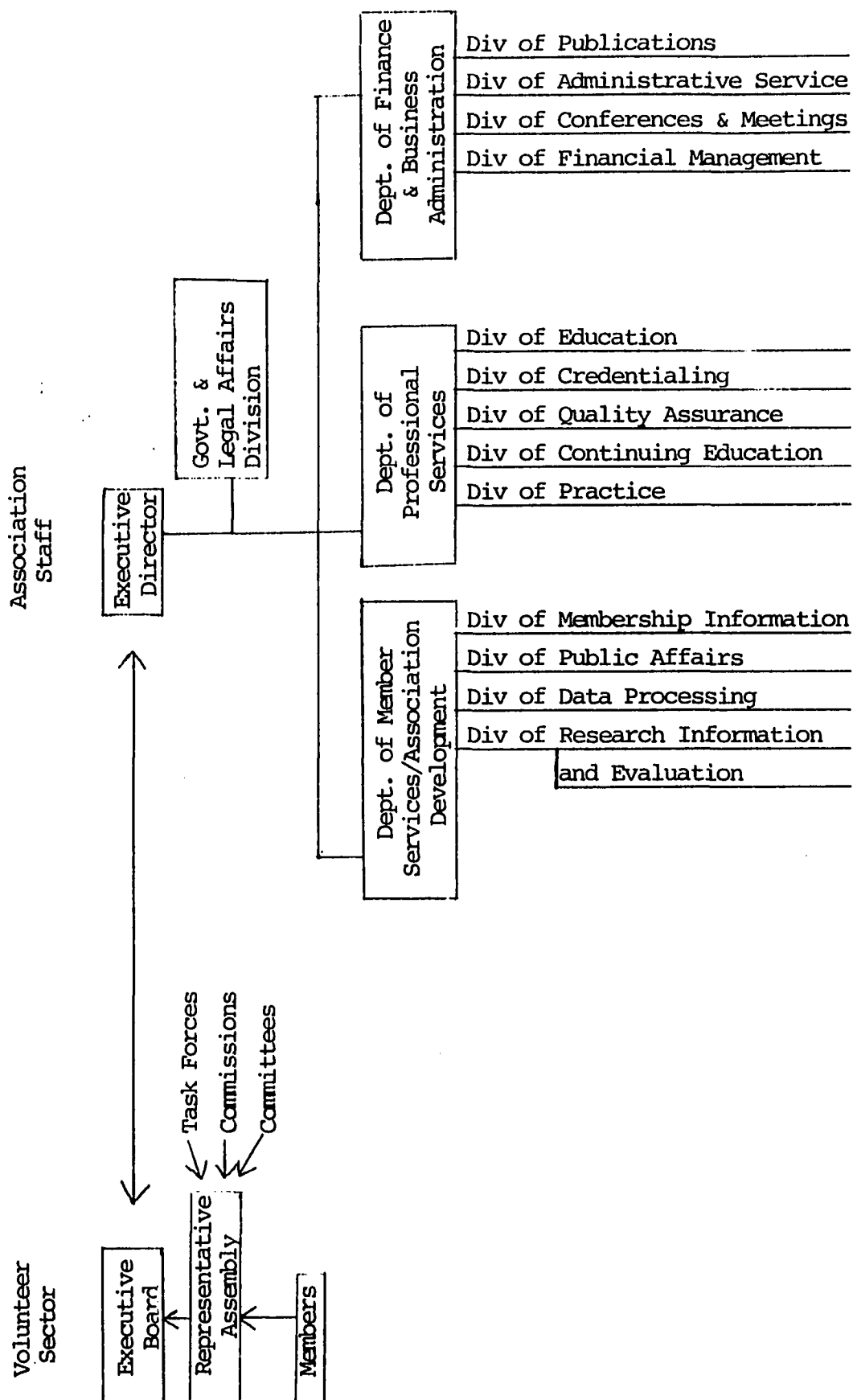


Figure 1. American Occupational Therapy Association

Division of Education were therapists. The Division also employed two secretaries.

The primary responsibilities of the Division of Education were:

- collaboration with the AOTA Commission on Education in the promotion of quality education for occupational therapists and occupational therapy assistants;

- participation in the establishment, interpretation and review of educational standards for occupational therapy curricula;

- consultation with developing and ongoing occupational therapy educational programs; and

- collaboration in the development of educational documents.

High priorities of the Division of Education included student recruitment and continued development of the student organization, development of new educational programs, the promotion of graduate education, and the development of continuing education programs for academic and fieldwork faculty.

The Director of the Division of Education was the advocate for occupational therapy education among the Association staff. She coordinated educational planning with the Commission on Education; consulted with faculties of occupational therapy curricula; maintained a close liason with external organizations; reviewed AOTA documents pertinent to education; monitored federal programs that provided funds to support educational projects; and prepared and managed the Division's budget.

Plan for Internship

At the time of the internship, I was involved in occupational therapy education. Consequently, one of my goals for the internship was to learn about the workings of the Division of Education. Since my particular area of interest was fieldwork education, an additional goal was to be active in the development of a training unit for fieldwork educators. A prospectus for the experience was developed (see Appendix A) with three goals in view:

- to understand the responsibilities of, and relationship among, the various divisions of the American Occupational Therapy Association,

- to demonstrate involvement in selected activities of the Division of Education, and

- to develop a training unit for clinical supervisors.

The internship was completed in a professional organization, the American Occupational Therapy Association (AOTA), of which I was a member. It consisted of six weeks of full time involvement in the Division of Education, a unit in which, as an educator, I had particular interest. I had been a delegate to the Commission on Education (the parallel unit in the volunteer sector) for four years. Goals of the internship were to learn more about the Association and the Division of Education, and to be actively involved in the development of an educational tool for training occupational therapy clinical educators.

DESCRIPTION OF THE EXPERIENCE

Preparatory Steps

Prior to beginning the internship at AOTA, I consulted with the Director of the Division of Education. When I stated that my ultimate goal in working on an Educational Specialist degree was to be able to help clinical educators become better student supervisors, she described the need for a training vehicle for student supervisors, and suggested that I might be involved in helping to develop such a learning tool. Since it had become financially impossible for many associations or groups of individuals to seek the services of a consultant or guest lecturer, the Director wanted to see the Division of Education develop a manual and A-V materials that could be rented by therapists to assist them in putting on their own workshops. I was interested, and agreed to spend time developing these materials during my internship.

From the outset the workshop was envisioned as experiential, rather than theoretical, so that participants would have an opportunity to practice a limited number of skills, rather than to learn about many. A first concern was the content to be included. If a two day workshop might eventually be developed, what would be the most significant content for those two days?

We decided to think in terms of three or four separate half-day units so that users could rent individual units. While a state association might want to present a two day workshop, a local group might want just enough material for an evening's meeting. It was reasonable, therefore, that one unit should be developed and piloted before proceeding with others.

Initial Activities

I first designed a questionnaire to be sent to a limited number of therapists eliciting their opinion about the content of a workshop for clinical educators. The questionnaire was approved by the Division Director and, a month before the internship was scheduled to begin, it was sent to 35 therapists (see Appendix B for questionnaire and accompanying letter). The questionnaire also was distributed to a group of approximately 30 therapists at the AOTA national conference in late April, 1983.

Before beginning the internship, time was spent reviewing training materials that included a leader's manual and incorporated A-V materials. Two packets of materials were examples of two different approaches. One (Newton, n.d.) included a complete script for the leader to use, while the other (LINC, 1982) relied on suggested activities and questions for discussion.

The Division Director had expressed interest in using the television services at Western Michigan University to produce the videotapes to accompany the workshop. A meeting with the Associate Director of the Division of Instructional Communications resulted in some suggestions about the videotapes and an estimate of production costs.

With the questionnaire responses and a preliminary estimate of training materials and costs, I proceeded to Washington D.C. to begin a six week internship at the national office of the American Occupational Therapy Association.

Week 1

During the first week of the internship a considerable amount of time was spent reviewing the organizational chart and determining the responsibilities of individual staff members. There were 70 employees at AOTA. Approximately half were professional staff; the other half were support staff.

Division of Education

The three professional staff members in the Division of Education had distinct and separate duties. The Director was primarily responsible for education at the professional level, that is, education for registered occupational therapists. Her main job responsibilities

were outlined in the introduction to this report. Some of the activities she was engaged in emanated from actions taken at the annual conference, which had been held just prior to the time of the internship. These activities included preparation of the Commission on Education mailings to send to all members and of the newly written Essentials of an Accredited Program in Occupational Therapy to send to the Committee on Allied Health Education for their approval. At the same time, she was engaged in other duties, including reading grant proposals for the Allied Health Commission and planning for an October meeting of occupational therapy curriculum directors.

The Assistant Director of the Division of Education was responsible for technical level education, that is, education for occupational therapy assistants as opposed to education for registered therapists. She was involved with development of technical programs, which were usually housed in community colleges. She also had two particular responsibilities at the professional level: she answered queries from individuals seeking information about a career in occupational therapy, and she had been designated national office liason to the committee then revising the fieldwork evaluation instrument used to appraise the clinical performance of occupational therapy students.

The third staff member of the Division of Education functioned as the liason to the national office for two groups: the student association and the Committee of State Association Presidents.

All three members worked autonomously. The Division Director monitored their progress and assigned new responsibilities when appropriate. Once yearly she evaluated them on a common form.

All three professional positions in the Division of Education required varying degrees of conceptual, human and technical skills. The Director's position, because it was one of innovating, anticipating potential problems before they arose, and then developing strategies to meet them, required a particularly high degree of conceptual skill. The Assistant Director, on the other hand, spent a great deal of time communicating with community college administrators who were proposing to initiate occupational therapy assistant programs (sometimes without adequate resources). Her position required a generous portion of human relation skills.

Other Units

During the first weeks of the internship, I interviewed a number of directors of the departments and divisions of AOTA. Interviewing provided a better understanding of how they viewed their roles and

responsibilities. The structure of the association staff had recently been reorganized. Previously, each division head reported directly to the Executive Director. At the time of the internship, the three department headships were newly created positions. In the course of the same reorganization, several new divisions were formed. For example, continuing education activities, which were previously under the auspices of the Division of Practice, were formed into a new division, as were publishing operations which previously had been an activity of the Division of Public Affairs.

In addition to interviewing staff, information about the function of the Association was gathered by reviewing a variety of documents. Those that were particularly informative were the official descriptions of each division, the weekly correspondence file which was collected for review by the Executive Director, and the Strategic Integrated Management System (SIMS) used by the Association to identify and prioritize planning objectives.

Intern Participation

During the first week of the internship I was involved in several activities that were specific to the Division of Education. One was the collection and organization of feedback data from the 1983 Commission on

Education meeting. The data showed participants responding more favorably to formal presentations on matters of educational concern than they did to participatory, problem-solving sessions.

A second activity in which I participated was the selection and distribution of books that had been submitted for review in the American Journal of Occupational Therapy. Decisions to be made revolved around which books should be reviewed, whether they would receive a short or full length review, and who would be asked to do the review. Books were selected for review if they had been written by an occupational therapist, if they were about occupational therapy, or if they were important to occupational therapy. However, the last criterion was sometimes ignored. For example, a book about arthritis was eliminated from consideration because it was written by a physical therapist.

A third activity related to queries about a career in occupational therapy. These were generally answered with a form letter. Some, however, were unusual and required an individual response. Writing letters of response for the Assistant Director provided another way of learning about the activities of the Division of Education.

Training Unit for Clinical Educators

Some initial work was begun on the major responsibility of my internship. The Division Director believed that I could go no further with the training materials for clinical educators than an outline for the first unit. This was in part due to the time constraints of a six week internship, and in part due to financial limitations. She had submitted a budget request for \$4,500.00 for the first step of the training unit. The money was targeted primarily for audiovisual expenses. Budget requests for FY 83-84 would not be approved until October, 1983.

Several other therapists, who had given workshops on supervision, were contacted and asked for descriptive material. Results of the questionnaire were tallied (see Appendix C). Although the respondents considered all items listed on the questionnaire important, there was a slight preference for those clustered around communication. Upon discussion with the Division Director, a decision was made to develop the first unit around issues of supervisor-student communication and to use some of the problems most frequently encountered with students as illustrations of communication difficulties. This first unit would form a three to four hour workshop.

A videotape and manual (Barnard, Barr & Schumacher, 1982) was reviewed. The videotape, which consisted of

six dramatizations from pharmacy practice, was intended to stimulate awareness and discussion. The manual contained discussion topics, activities, and a list of additional readings. A similar format was to be attempted for the occupational therapy training unit. This initial concept, however, was gradually modified in response to feedback and input from other therapists.

A variety of literature about clinical education was reviewed during this and the following weeks.

Week 2

Division of Education

A new involvement for the Division Director was attendance at the National Advisory Council on Health Professions Education. Traditionally this body had been comprised primarily of physicians and dentists. Only in the last few years had there been a representative from the allied health professions on the council. At the May 9th meeting, the 1983 and 1984 budgets for the Bureau of Health Professions were compared. It was interesting to note that Congress allocated more money to the health professions than the President requested.

In 1983-84, federal financial resources were being allocated more readily for special problem areas (e.g., the disadvantaged in health education) than for broad institutional support. The Division Director proposed to

continue to attend scheduled meetings, both to become known and to keep abreast of funding possibilities for occupational therapy. As a result of information gathered at this meeting, she decided to consider writing a grant proposal for funds to publicize occupational therapy among disadvantaged students, and to alert curriculum directors to the possibility of funds becoming available for financial aid for disadvantaged students through the Bureau of Health Professions.

During this week the Division Director completed one of her regular duties: a report on activities of, and actions taken by, the Commission on Education during their recent three day meeting at the 1983 annual conference. Other division directors, also, regularly reported on activities of the volunteer component of their area of responsibility.

Other Units

Several division directors were interviewed during this time. Government and Legal Affairs was a division that had grown rapidly in recent years. Its prominence was demonstrated by the fact that it was the only division reporting directly to the Executive Director. Staff were responsible for promoting and lobbying for occupational therapy with government officials and agency personnel, and for legal matters relating to the

profession. Their duties included monitoring all government documents, initiating change (such as a recent Medicare change which increased opportunity for coverage for occupational therapy services), alerting relevant groups of therapists about potential legislation, and keeping the membership informed on pertinent issues.

Continuing Education was a newly formed division. Its establishment was recognition of the need among therapists for formalized opportunity for continued learning. The staff had developed several workshops and, at the time of the internship, they were preparing materials on vocational readiness, mental health, and gerontology. Since their funding was limited, they relied on grants and were then preparing a grant proposal to develop the gerontology workshop. Additionally, this division was responsible for all administrative work related to the annual conference.

The Credentialing Division attended to two main functions. Staff were responsible for the administration of the accreditation procedure for all occupational therapy curricula and for the certification examination which all students were required to take before they could become registered therapists.

During this week, the Director of the Publications Division (who was not a therapist) held a meeting of all therapists on the national office staff to ask their

opinion of some materials that had been submitted for publication. In the past, AOTA had published only a very small amount of submitted material. In 1983 the Executive Board directed the national office to seek materials in an attempt to make publications a profitable activity and, thereby, reduce the need for an increase in membership dues. The question of AOTA putting a "seal of approval" on materials arose. Another problem was the need to establish a review board, since therapists in the national office might not always be the most appropriate reviewers. The lack of a stronger link between national office staff and practicing clinicians was a surprise. Most of the materials viewed at the meeting were audiovisual. The lack of technical competence that was evident in some of the material was frequently the cause for rejection.

Training Unit for Clinical Educators

An outline of the training unit was drafted. The unit was visualized as a workshop of three to four hours centering around concerns of communication. Subunits about general communication, feedback, levels of student maturity, and supervisor-student collaboration were outlined, with the intent that two of these four subunits might eventually comprise the workshop.

Six local clinicians were contacted. The project was

explained to them, and they agreed to meet the following week and critique the concept and the outline (see letter, Appendix D).

Week 3

Division of Education

The third member of the Division called a meeting of division directors to discuss a new responsibility she had been given. AOTA had begun to accept student interns and she had been placed in charge of arrangements. She was uncertain about her abilities in this area since she was not an educator, and she hoped that a discussion among division directors would clarify their expectations of students. A lively dispute centered around formalizing objectives and criteria. Several people (non-educators) believed that, in order to be flexible and seize opportunities as they presented themselves, they could not foresee what activities students would be involved in and, therefore, on what they would be evaluated. The educators in the group argued that students always had the right to know on what criteria they would be evaluated.

Most therapists were familiar with clinical internships. However, an internship in a business (such as AOTA) was quite different. There was consensus that it was more difficult and time consuming to share

administrative activities with an intern. This was believed to be especially true at AOTA where so much time was spent communicating, either through written documents or by telephone. Directors agreed that the single skill most necessary for the intern was writing ability.

Other Units

During an interview, the Director of the Division of Practice described her responsibilities. Her duties included keeping therapists apprised of information relating to practice and, in response to the most frequent areas of inquiry, she had developed 33 information packets on a variety of topics. The packets were revised yearly by resource people. Another area of concern was practice standards. She monitored these by serving on the Standards and Ethics Committee of AOTA, and she reviewed standards of other professions that related to occupational therapy. She regarded maintaining the visibility of occupational therapy as a part of her job.

Training Unit for Clinical Educators

Six clinicians and several members of the office staff met to discuss the training unit. An 11 page outline, consisting of four possible content areas for a half day workshop, was prepared and distributed to them

(see Appendix E). It was explained that the general topic would center around communication concerns, and that the workshop might include two of the topics outlined. Participants were asked to spend the first 20 minutes scanning the material and were told that consideration would then be given to topics that might be most useful, information that might be included, and the amount of detail a group leader might require. However, little time was spent reading the material because staff members immediately began talking about a workshop on supervision and communication. One participant believed that the AOTA workshop should contain more didactic material than was included in the draft. All participants, except the Division Director and myself, believed that there should be a philosophical base presented, including a definition of supervision, clarification of its purpose and of the role of the supervisor, and amplification of various styles of supervision.

In general, participants wanted to include everything in the outlines plus additional material. However, they eventually agreed that the materials on levels of maturity might be eliminated and that those on general communication and on feedback could be integrated. They preferred to emphasize the collaborative relationship between supervisor and

student, and decided that the workshop should proceed from the philosophical base of supervision, through collaboration, to communication techniques, especially feedback. There was disagreement about how much detail should be included in the leader's manual, with some believing that leaders would need a great deal of guidance, and others believing that all the leaders would need was a list of "cognizant points." The participants agreed to send me a list of information that they thought should be included in a presentation on the philosophy of supervision (although only two actually did). In turn, I agreed to rewrite the outline, basing it on collaboration and communication techniques; and to send it to them for review.

External Activities

A conference, entitled Race and Supervision, was held at a nearby psychiatric hospital. Topics included the role of the supervisor, factors that provoke change in the student, and racial issues in the health professions. Speakers tended to deal with race and supervision separately, rather than link them together.

There was a distinct difference in the attitude expressed by the participants at the Race and Supervision conference and the view that had been taken by the occupational therapy clinicians several days earlier. As

stated above, the occupational therapists wanted to emphasize supervisor-student collaboration. In opposition, the participants at the conference on Race and Supervision regarded collaboration as "a sort of hoax," because, they said, a student's performance ordinarily was followed by the supervisor telling the student how adequate or inadequate the performance was. They spoke frequently of the "status differential" between supervisor and student.

The most profitable aspect of the conference, in relation to my project, was an introduction to an individual, who was both an occupational therapist and a psychodramatist, who expressed interest in assisting with the videotapes for the AOTA workshop.

Another workshop on supervision was sponsored by the Occupational Therapy Department of Temple University. It covered two main topics: learning styles and the design of learning experiences. Participants first were introduced to a learning style inventory (Kolb, Rubin and McIntyre, 1974) which identified learning style as either accommodating, diverging, converging, or assimilating. Later, nine steps were identified in the design of learning experiences. Appropriate enabling objectives and activities to meet terminal objectives were studied in some detail. Unfortunately, lack of time prevented linking the design of learning experiences to the

student's learning style.

Week 4

Division of Education

A therapist from the Rehabilitation Institute of Chicago (RIC) visited AOTA seeking sponsorship of RIC workshops. The Division Director asked the visitor to put her proposal in writing and stated that she would pass it on to the Executive Board. She urged the RIC therapist to make a formal presentation, saying that she did not want to discourage new ideas. However, she also explained that, at the time, there was no mechanism in place for AOTA to give its approval to revenue making activities by other bodies.

Other Units

Because the Director of the Quality Assurance Division was out of town, I interviewed her administrative assistant who explained that quality assurance involved initial consideration of all concerns of a department, selection of those problems about which something could be done, and the creation of a systematic method of solving them. The Division was currently involved in other activities, particularly an efficacy data project and coordination of the Strategic Integrated Management System. The director of this division, who

had been recently honored by being named a Fellow of the American Occupational Therapy Association, had seen the need for a quality assurance division and fought for its establishment. She designed the efficacy data project. Her leadership ability was based on her ability to innovate; and to identify problems, design strategies to solve them, and assume responsibility for implementing the strategies.

Training Unit for Clinical Educators

It was difficult to redraft the outline for the workshop. On the one hand, it was necessary to conceptualize just what participants should expect to learn and how they could best learn it; and, on the other hand, to technically separate the draft into three areas: outline material to go into the manual, explanatory notes for leaders, and notes and questions for the reviewers.

After reviewing the second draft (Appendix F), the Division Director stated that it flowed less well than the first, that there needed to be linkage between collaboration and feedback, and that reviewers needed more guidelines to know what to react to. She believed that clarification in a covering letter would be more efficient than rewriting the draft. However, I found it simpler and more effective to write a third draft.

The Assistant Director of the Division of Education,

who had been unable to attend the meeting about the workshop, reviewed the new draft, and stated that she believed the introductory section on philosophy of supervision should be eliminated. She preferred that workshop participants spend time gaining a supervisory skill that they could "take away with them."

External Activities

AOTA sponsored an item development workshop in which 15 clinicians, from varying areas of practice, were invited to refine and critique new questions for the occupational therapy certification examination. The greatest difficulty seemed to be avoiding negative answers and in developing good foils.

Week 5

Division of Education

It seemed an interesting exercise to poll the three professional members of the Division to see what they were working on during a given day. The Division Director was reviewing a grant proposal that had been prepared by the Continuing Education Division, gathering materials for the yearly performance appraisal of the four other employees in her division, and completing a self evaluation for her own appraisal. She stated that, since the reorganization, all directors in the Department

of Professional Services completed self evaluations. Therefore, she was asking employees in the Division to do a self evaluation also. She had asked the head secretary to complete the performance appraisal on the junior secretary.

The Assistant Director was preparing a keynote address to give later that week at a state association meeting, analyzing curriculum materials from two potential occupational therapy assistant (OTA) programs to determine whether they would meet the Essentials of an Accredited Program in Occupational Therapy, and preparing a letter of support for an OTA chair who hoped to move a program from a certificate to an associate degree. The third member of the Division was designing a manual describing the internships available at the AOTA office.

I synthesized materials gathered from the 50 participants at the Forum on Graduate Education held at the 1983 annual conference. The issue of graduate vs. undergraduate entry level for occupational therapists was a sensitive one. Some therapists, particularly some in education, thought that entry into the profession should be at only the graduate level because a therapist would then have greater research skills, more background in liberal arts, and a stronger career commitment. In return they would receive higher salaries and greater acceptance by other health-care professionals. The Forum

on Graduate Education was scheduled by the Division Director in order to begin a dialogue about the issues and strategies related to the question of entry into the profession at the graduate level. Synthesizing the issues and strategies identified by forum participants revealed that most related to three concerns:

cost - to the therapist, the student, the university and to the consumer of occupational therapy services;

problems of faculty preparation ; and

a need to clarify the rationale for moving to graduate level entry.

Other Units

All previous interviews had been with staff of the Department of Professional Services. During the fifth week I interviewed the two men who were the directors of the other two departments.

The Director of the Department of Finance and Business Administration had 32 years of experience with General Electric before he came to AOTA, and he considered himself a professional manager. His department was responsible for all association business having to do with revenue items, including business aspects of the annual conference, personnel, property management, and publications. He emphasized a need for creativity in his position. He stated that it was important that he find ways to accomplish the job with

fewer employees, rather than hire more.

The Director of the Department of Member Services and Association Development had spent 12 years with the Public Health Service where he was involved with statistics and research methods related to disease control. In part because his college major was English, he had been hired by AOTA to write the history of the Association. He saw a need to organize and expand the data gathering activities of AOTA; he designed a position to fill the need; and he quickly assumed the job.

As director of a newly created department, his major responsibilities were related to information management and dissemination. Membership information, public affairs, data processing, and research and evaluation were all services of this department. A recent example of the fruits of the department's labor was the AOTA student recruitment program which was inaugurated in response to data showing increased manpower need for occupational therapists and, at the same, a reduction in applicants to the educational programs.

Training Unit for Clinical Educators

During this fifth week the outline for the third draft of the training unit was completed and sent to reviewers with an accompanying letter (see Appendix G). In this draft, questions for reviewers were presented in

a column on the right side of the page. The material that would eventually comprise the leader's manual was divided into an outline from which the leader would speak, in regular type, and explanatory material for the leader, in script type.

The Division Director reviewed the draft and expressed enthusiastic approval. We discussed the fact that the outline might be too sparse for the leaders, but we both preferred not to provide a script; and we felt the workshop would be better if leaders were to do their own preparation using the AOTA materials as a guide.

Week 6

The Role of the Executive Director

An interview with the Executive Director of AOTA revealed that the Executive Board developed guidelines based on policy set by the Representative Assembly, and presented them to the Executive Director. After conferring with the department directors to plan strategies, he would dispense charges. The department directors would pass the charges on to the appropriate division directors, and would work with them to develop programs.

In addition to dispersing charges and monitoring staff progress, the Executive Director was the Association's main contact with outside groups. He

regarded his job as one of assembling the best staff, giving them the opportunity to think creatively, and reinforcing their successes. He did not specify how he dealt with failures. He was the prime architect of the reorganized structure of the national office described in the introduction to this report and was responsible for the ensuing "shake-up" of personnel.

Division of Education

At a staff meeting, the Division Director presented the list of issues and objectives that had been prioritized by the Representative Assembly and the Executive Board for FY 84-85. Those issues relating to cost containment received priority. Educational issues were among the lower 50% of the list. Based on this information, each of the three staff members prepared their own plans and projects and submitted their budget requests. These requests would not be approved until October of 1984. Budget planning was difficult at AOTA. Requests were due 15 months before they were approved. Thus, the 1984-85 requests had to be submitted before it was known if the 1983-84 requests would be approved. The Division Director stated that she planned to request 1984-85 monies for further units of the workshop for clinical educators.

In an informal conversation, the Division Director

identified what she saw as the main problems in occupational therapy education:

- a dwindling pool of students,
- an insufficient number of qualified department heads,
- the question of entry at the graduate or undergraduate level,
- the impact of the decision by physical therapists to require entry at the graduate level by 1990,
- the large amount of curriculum content to be covered in an insufficient number of years, and
- the unevenness of fieldwork education.

Other Units

A member of the Public Relations Division called upon the therapists on staff to view a slide presentation on the national association and to consider possible revisions. There seemed to be an established, if unwritten, procedure at AOTA that people in the Departments of Finance and Business and Member Services and Association Development would call upon the therapists in the Department of Professional Services when it was necessary to review occupational therapy content. This was a wise safeguard, but it was time-consuming. Materials that had been submitted to the Publications Division also were reviewed during the week.

Training Unit for Clinical Educators

During the previous week several people argued that

they thought the leader's manual for the workshop should be less sketchy, and that it should contain more material, rather than rely on the leaders to supply their own information. The split between this position and the one, taken by the Division Director and myself, that an outline only should be provided, blocked progress. The most convincing argument, however, came during the last week of the internship.

I had asked a clinical educator for some detailed feedback on the third draft of the training unit. He was very helpful, and spent several hours in the kind of closely analytical criticism that I had been seeking. He pointed to a need to legitimize the materials by referring to the literature, and stated that most potential leaders simply would not "fill in the blanks" adequately. If they were ineffective as leaders they were likely to blame AOTA for a useless packet of materials. The session with him was the most stimulating instance of productive collaboration that occurred during the internship.

The following day was equally profitable. A meeting with several therapists practicing in psychiatry stimulated their interest in the project. A useful insight derived from this meeting was recognition of the possibility that, rather than looking at collaboration and feedback as two aspects of communication, it might be

more fruitful to consider positive feedback as an element of communication that could lead to a collaborative relationship.

One therapist, who was also a psychodramatist, suggested a different way of structuring the troublesome role-playing activities, and he promised to send explicit directions in writing. He and a colleague agreed to do a trial tape demonstrating collaborative relationships by the end of August.

Final Appraisal

The morning of the last day was spent sorting through materials, and assessing the past six weeks to determine what progress had been made and what tasks were still to be completed. I prepared an agenda for the afternoon's meeting with the Division Director.

During the final meeting with the Division Director, the following points were agreed upon in regard to the design for the workshop:

There would be more detailed content. For each page of outline there would be an accompanying page of explanatory narrative. Leaders would be instructed to complement the outline with material from the narrative page and from their own resources.

The introductory material on supervision could grow into a "tail wagging the dog." Therefore it should be limited to 15-20 minutes. I agreed to make a tape and send it to the Division Director. If the three Division staff members determined that the subject had not been done justice in the time allotted, they would either revise the section on the philosophical base of supervision or eliminate it.

Fitting the material into a three to four hour period, which had been one of my main worries, would no longer be a concern. The Division Director stated that there were too many workshops without enough time to practice what had been taught. She preferred to extend the time for practice, rather than to reduce the activity sessions.

As suggested, feedback would be viewed as an element of communication leading to a collaborative relationship. This changed perspective would require a reordering of the outline. It would also allow a change in the title of the workshop from Communication to Feedback and Collaboration in the Supervisory Process.

The workshop materials involved multiple responsibilities which fell into five general areas:

1. overall design,
2. leader's manual,
3. videotape scripts,
4. videotaping arrangements (including actors), and
5. leader at pilot.

I would continue to be responsible for the first two. The Division Director would assume responsibility for investigating the possibility of less expensive taping arrangements at a nearby hospital. This would place the taping in Washington, rather than in Michigan, and within her ambit of responsibility.

We would remain in contact with the psychiatric therapists, and view their videotape when it was completed. Although the Division Director had hoped to pilot the workshop at the 1984 annual conference, she had decided that would not be appropriate. When it was completed, she would arrange to have it presented at a state meeting or other appropriate gathering. As soon as the materials were ready, however, I would present a trial workshop for the staff of the Department of Professional Services, or other small group in Washington, for a close critique.

Since videotaping costs now seemed likely to be less than her budgeted figure, the Division Director agreed to allow me to seek the services of a consultant (pending budget approval) to review the leader's manual and overall design.

The Division Director remarked that, since her budget would not be approved until October, we were ahead of the projected schedule. She remarked that I had given her a gift.

GOAL ACHIEVEMENT

In the course of the internship, a majority of the objectives stated on the prospectus were met. Conceptual objectives were related to an understanding of the goals and activities of the American Occupational Therapy Association, rather than to personal vision. These objectives included an awareness of the total organization, of the divisions within it, and of the interrelationships between the divisions. Activities undertaken to meet these objectives included observation, interview, review of relevant documents, and attendance at meetings. Human objectives were met thorough involvement in job tasks, a search for input from staff members and clinicians, and requests for, and coordination of, their assistance. Technical skills were demonstrated in data preparation and, more especially, in the design of a workshop for clinical educators.

The activities reported on in Chapter II, and illustrated in the appendices, are evidence of the opportunities provided to meet the objectives. My involvement in meeting conceptual objectives focused primarily on awareness of the conceptual activities of others. I observed staff members working to meet the goals of the organization and to meet the responsibilities of their own divisions. The concept of the workshop for clinical educators had been defined by

the Director of the Division of Education. However, beyond the original idea, I initiated all actions, including the suggestions that we solicit the opinions of therapists about content through the use of a questionnaire and that we seek input and cooperation from local clinicians. A preponderance of my internship was devoted to activities requiring human and technical skills, however.

Following is a list of those objectives that were met and a description of the means through which they were accomplished.

Objectives Relating to Conceptual Skills

Learn Goals of Total Organization

Goals of the organization were identified through reading, interview, and informal discussion. Primary goals of AOTA were to provide service to members, to promote occupational therapy, to maintain the standards and integrity of the profession, to maintain communication among members, and to encourage program development.

Understand Responsibilities of Each Division

Responsibilities were clarified through interview, informal discussion, reading, and attendance at meetings. Each department director and all directors in the

Division of Professional Services were interviewed. Summaries of these interviews are included in Chapter II.

Analyze Relationships of Various Divisions within AOTA

Analysis was accomplished primarily through observation and informal discussion. Since the reorganization of the structure of the national office staff had occurred only eight months prior to the time of internship, there was still some movement in the determination of areas of authority. The fact that none of the staff members in two of the departments were occupational therapists, while all staff (except support members) in the third department were therapists resulted in some tentative relationships.

Learn Various Responsibilities of Division of Education

Although formal participation through the interview of division staff and attendance at meetings was helpful, most information was gathered through informal observation and discussion. The three professional staff members always were willing to share information about their various duties. The review of job descriptions, documents related to the Division, and the correspondence file added to my understanding of the workings of the Division. In one case, at least, the reorganization had brought about an unusual allocation of responsibility.

One of the members of the Division of Education had been a part-time employee in what was formerly titled the Division of Human Resources and Operation Research, where she functioned as the liason to the Committee of State Association Presidents. With the reorganization, she was made a full time employee, given the additional responsibility of liason to the student association, and attached to the Division of Education. Thus, during the time of the internship, the link to state association presidents was lodged within the Division of Education because this staff member retained her prior job responsibilities, even though she moved to a different division. When she leaves the post, it is unlikely that the liason to state association presidents will remain in the Division of Education.

Analyze Duties of Personnel

This objective could not be separated from the previous one. Personnel responsibilities are described in Chapter II of this report, pp. 7-35.

Acquire Knowledge of Organizational Response to Membership Concerns

Staff members responded to concerns reaching them from several constituencies. Thus, the Division Director decided to allocate resources to a training unit for clinical educators in response to individual complaints

about the unevenness of fieldwork education. On the other hand, the formation of a committee to revise the student evaluation instrument grew out of a charge from the Representative Assembly. In response to a third source, data indicating a decline in student applicants, a session was held for the purpose of sharing recruitment strategies and materials at the 1983 Commission on Education meeting.

According to the operating procedure at AOTA at the time of the internship, all charges emanating from the Representative Assembly had to be acted upon. Other actions were taken at the discretion of the directors. Therefore, based on a 1983 charge from the Representative Assembly, a position on the role and value of entry-level graduate education was to be declared by 1985. Not surprisingly, this same concern was expressed by the members of the Commission on Education. However, the Commission on Education expressed even greater concern about inadequate faculty preparation for graduate education. Since the issue of faculty preparation was not addressed by the Representative Assembly, whether or not it would be dealt with in the Division of Education depended upon the discretion of the Director. (Her unvarying responsiveness to Commission concerns insured the likelihood of its being placed on the agenda, however.)

Objectives Relating to Human Skills

Interact with Personnel of Division

Daily opportunity was provided to discuss job responsibilities of the staff, and current and projected activities of the Division. Staff members were receptive to my observations and made use of my background and experience. They also were socially compatible. A collegial relationship was quickly established.

Assist Personnel with Selected Tasks

Some of the activities in which I participated were: publication materials review, organization of conference feedback, letter writing, synthesis of issues of graduate education, and preparation of a design for a workshop for clinical educators.

Compile Opinions Regarding Training Unit

Clinical educators and fieldwork coordinators were contacted at the annual conference and during the time I was at AOTA. Their concerns about fieldwork supervision were varied. Several that were mentioned consistently were: the problems of giving negative feedback, personality conflicts, the dependent student, lack of student maturity, student inability to transfer learning from the classroom to the clinic, lack of student

preparation for the large amount of material to be covered during the fieldwork experience, and the great amount of time required to adequately supervise students.

Use Expertise of Others

Six therapists, who had given presentations on supervision, were contacted and asked for information. Several sent written materials. One sent a trigger tape. Six clinicians in the Washington area were asked to attend a meeting about the workshop and to review subsequent materials. Three additional meetings were held with therapists who were particularly willing to cooperate. Responsibility for preparing a trial tape, for submitting written directions for role-play, and for providing citations from the literature was delegated.

Objectives Relating to Technical Skills

Participate in Student Recruitment

Many requests for information about training for a career in occupational therapy were received in the national office. Most of these inquiries could be answered with one of several form letters. Some, however, required an individual response. During the internship, I answered a number of inquiries by explaining the career and training options available. In addition, I viewed and critiqued a slide tape

presentation which was being considered as a recruitment tool.

Determine Critical Components of Training Unit

I designed a questionnaire to seek input from clinicians about the most critical content for the training unit for clinical educators. In part, the items that appeared on the questionnaire reflected content frequently included in other workshops and in the literature on supervision, as well as feedback gathered from supervisors and students over the course of my seven years as a fieldwork coordinator at Western Michigan University. The responses to the questionnaire indicated high interest in all content areas except "preparing the student manual" (see Appendix C). Literature on clinical education was reviewed.

Plan Use of Media

One individual who was experienced in videotaping and another with a background in the preparation of educational materials were contacted. Several training packets were reviewed. Much of the outline for the leader's manual was based on the planned use of media.

Design Selected Units of Workshop

Three separate outlines of a unit on communication

were completed (see Appendices E, F, G). Tentative scripts were written for selected portions. Materials were reviewed with members of the Division of Education, other staff members, and local clinicians.

Objective Partially Achieved

Coordinate Total Workshop

This objective was accomplished for the first unit only. Individuals were contacted and they agreed to contribute feedback and/or materials. Guidelines and a tentative deadline were set. A two hour consultation with the Director on the last day of the internship confirmed responsibilities in writing.

Objectives Not Achieved

Construct Outline of Two Day Workshop for Student Supervisors

Based on a more realistic appraisal of time and financial limitations, a decision was made during the first week of the internship to deal with one unit of the workshop only. Content of future units would be determined by the Division Director. It would be based upon feedback from the questionnaire, her own perceptions of need, and reactions to the piloting of the first unit.

An outline was constructed for the first unit.

Plan Evaluation of Workshop

Progress on the workshop had not proceeded far enough to include completion of an evaluation instrument. Plans for evaluation were postponed to a future time.

Addendum

There was one objective that should have appeared on the prospectus, but did not. It was not until the last week of the internship that I realized its omission was causing me a sense of exclusion. It should have read: "Perform job duties of members of Division of Education." Without consciously knowing it, I had hoped to be able to carry out many of the responsibilities of the members of the Division. Both because of my stated objectives and because of the way in which the Division functioned, I spent a preponderance of my time working on the clinical educator's workshop instead.

ANALYSIS AND SYNTHESIS

The Organization

Professional associations, such as AOTA, formed a business milieu unlike that found in the corporate world. At least in part, this was due to the dual lines of authority that proceeded from the policy-making and management bodies to the volunteer sector and the national office staff.

In the American Occupational Therapy Association, the Executive Board was the management body which implemented policies set by the Representative Assembly. It also indirectly managed the national office through general guidelines conveyed to the Executive Director.

As in any organization, there were both formal and informal lines of communication. The informal line of communication linked members of the voluntary sector with the office staff in matters of common concern, such as education, and in information exchanges that focused on the details of current activities. Formal communication was restricted to directives from the Executive Director. This restriction was perceived as necessary to avoid friction, misdirection and confusion. The Executive Director, then, worked directly with senior staff members to develop a broad plan of action.

The advantages of these dual lines of communication

between the two groups were greater than the disadvantages. The central position of the Executive Director could result in a bottleneck, and communication that arrived through formal channels might be slow and cumbersome. However, his position also provided for clarity of communication and the allocation of responsibility. In a sense, the two communication networks formed a system of checks and balances.

Staff Leadership

Certainly all department and division directors at AOTA had legitimate power as defined by French and Raven (1959) or authority of position categorized by Peabody (1962). It seemed that the presence of expert and/or referent power (French and Raven) could be identified among some staff who became new division or department heads at the time of the reorganization. Another example of the presence of expert and referent power was noted in the Director of the Quality Assurance Division who saw the need for an evaluation system that would identify and resolve health care issues, adapted an approach called health accounting, fought for its acceptance by AOTA, and continued to promote and instruct in its implementation.

The Director of the Division of Education was successful, in part, because of her responsiveness to constituent concerns; and, in part, because of her

ability to establish positive leader-member relations. In the light of Fiedler's findings (1967), she was a person-oriented leader, able to establish favorable leader-member relations, because division responsibilities involved a large number of unstructured tasks and moderate position power. She seemed to function most comfortably with the leadership style identified by Reddin (1970) as developer. She was concerned with allowing her staff to develop both individually and professionally. This characteristic was evident, not only in her relationship with her staff, but also in her approach to her intern. She treated me as a peer, capable of proceeding on my own, who would ask for assistance if necessary. The Division Director did not propose structure, but she supported and encouraged my efforts, offered positive feedback, framed any negative feedback within the situation, and encouraged self-direction of the internship. The fact that I was not directly involved in the day-to-day activities of each of the staff members was primarily due to my failure to recognize the incompleteness of my objectives and to the problems inherent in an administrative internship. As the Division functioned, staff members were involved with their individual responsibilities. My own preference for group, or team, efforts did not necessarily meet the realities and needs of the business of the Division.

The leadership process as depicted by Boles and Davenport (1975) could be seen operating in varying degrees among members in the organization. Administrative skills seemed somewhat more in evidence than leading skills. Perhaps this was not surprising for an organizational staff whose primary purpose was member service; and, in many cases, leading skills were provided by members in the volunteer sector. Those individuals in the national office who functioned most effectively as leaders were those innovators who were able to identify critical issues, develop courses of action, and create programs to implement decisions.

Reflection of Academic Work

Completion of a degree program, particularly one that included a field experience, should result in recognition in practice of concepts and information encountered in the classroom. There was ample opportunity to draw such parallels during my six weeks at AOTA.

Perhaps because so much time there was spent designing an educational tool, I most frequently referred to a training skills course. My reluctance to include all of the content that others suggested be included in the workshop on communication was based on the recollection of instance after instance of student presentations in which too much content was covered in

too brief a time. Consequently, presentations were neither sufficiently direct nor specific, and resulted only in confusion and flagging interest among the audience. Likewise, my suspicion about the possible negative effects of lingering too long over didactic material was based upon the greater success of those student presentations that had been concrete, were related to the experience of the audience, and actively involved them in the learning exercise. However, I had also to accept the evidence in the feedback of the 1983 Commission on Education meetings which indicated a preference for didactic presentations rather than participatory problem-solving sessions (see pp. 12-13).

The workshop attended at Temple University provided another illustration of principles learned in the training skills class. The instructor at Temple made the topic of learning styles come alive by allowing participants to discover their own learning style, to see examples of various styles in action, and to discuss in small groups the possible consequences of particular styles occurring in particular circumstances. Her coverage of learning objectives was almost equally experiential. However, although there was much that was valuable about parts of the workshop, it was unsatisfactory as a whole because insufficient time had been allowed to permit closure. The learning activities

were never linked to the learning styles, and the participants were left somewhat bemused.

A number of leadership characteristics described in classes on leadership, authority, and supervision could be identified during the internship. The willingness and ability to innovate was the most striking. Those staff members who sought out and attacked new problems, risking possible failure rather than continuing to address areas of comfort and safety, were those who assumed leadership roles most successfully.

There were, of course, other leadership characteristics in evidence: responsiveness to membership needs (e.g., the Forum on Graduate Education); efficiency (e.g., the production of manuals in response to common areas of inquiry); the willingness to delegate authority (evident on all levels, even the clerical); and, particularly important, the ability to articulate a position, to listen to others, and to integrate rather than compromise.

One circumstance at AOTA was striking, especially when viewed in light of awareness aroused by a course in Women in Management. Of the four top positions at AOTA, only one was held by an individual who was both a therapist and a female. The other three positions were held by males who were not therapists. This was surprising in a profession that was 95% female in 1983,

and it appeared that this circumstance caused a slight undercurrent of resentment. However, to the real credit of all involved, it did not seem to affect their job performance.

Indeed, a notable characteristic of the staff at AOTA was their attitude of cooperation, and this might be attributed in part to the communication network that had been established. An organizational communications course enabled me to identify several communication factors that might influence this attitude of cooperation:

The tasks were "uncertain." They were varied; methods were not standardized; results of efforts were not immediately known; and it was necessary to problem-solve.

The level of member maturity was high. Staff members were self-motivated and confident.

An open system of communication was in effect. Information flowed between units, and to and from the volunteer sector.

The use of both formal and informal modes of communication existed.

The group atmosphere was supportive. Members were friendly, self assured, efficient, and cheerful; and they demonstrated a harmonious relationship.

Two factors that might have worked in opposition to the items listed above were a communication network that was not tightly connected and a lack of task interdependence.

CONCLUSIONS AND RECOMMENDATIONS

The experience at the American Occupational Therapy Association was a valuable one. It enabled me to learn more about the function and structure of the Association than I could have learned in almost any other way. It provided me with information about the issues faced by the profession in 1983, and it allowed me an insight into strategies that were being formulated and implemented to deal with the issues.

My primary interest was in occupational therapy education, and spending six weeks within the Division of Education provided me with an awareness of the relationship between division staff and educators in the field. As a result of time spent in the Division, I was better able to view occupational therapy education in its totality, rather than from the perspective of one curriculum only.

The development of the training unit for clinical educators was a project that allowed me to meet my own interests and, at the same time, be of service to the organization.

The internship reflected much of the academic work that I had completed during the previous years, and I was able to put classroom information to practical use. I was allowed opportunity to interact with a large number of individuals, both on a one-to-one basis and in small

groups; to seek and coordinate the services of a group of consultants; to develop technical ability to construct an education tool; to be involved in a project that emanated from the national office; to participate in any learning experiences that I could identify; and to determine, and sometimes reconcile, conceptual differences.

I also was given the opportunity to establish a number of good friendships at the national office. That was a valuable outcome of the experience.

Several factors might have made the internship even more valuable. A careful examination of the objectives by the intern with both the academic and fieldwork supervisors, and consideration of what implications they might have for the experience, would seem to be more useful than unilateral submission of a prospectus. Although graduate interns need to be responsible for their own experience, it is frequently impossible to know what to expect, or how an objective might be implemented, before the experience begins. Alternately, objectives might be reexamined, and perhaps altered or refined, midway through the internship. This is difficult to accomplish during a six week internship because the time is insufficient. It should always be considered for longer experiences, however.

A second factor that might improve an internship involves the location of office space. I was fortunate

to be given my own office, and the arrangement of space at AOTA would have allowed no other than the one I had. Nevertheless, physical distance does prevent involvement. In view of the autonomy of administrative tasks, it is recommended that interns be allocated working space as close as possible to the people they will be working with and that, if proximity is impossible, strong efforts be made to maintain frequent contact.

The final recommendation is for contact between university and fieldwork personnel, either before or during the internship. If contact occurs during the experience, the intern should be included. I believe that contact would help to clarify the expectations of all parties involved and that it would, at the least, be a nice courtesy.

APPENDIX A: PROSPECTUS

Major Internship Prospectus

Intern: Claire Callan

Sponsoring Organization: American Occupational Therapy Association,
Division of Education

Field Supervisor: Stephanie Presseller, Director, Division of
Education

University Advisor: Dr. Carol Sheffer

Major Focus of Experience: Training for Student Supervisors

Duration: 6 weeks commencing May 2, 1983

Rationale: The Division of Education of the American Occupational Therapy Association is responsible for the establishment, interpretation, and review of educational standards for all occupational therapy curricula. As such, it maintains a crucial role in the implementation of academic and clinical education for occupational therapy students, and of continuing education for academic and fieldwork educators.

Because of the significance of its role in the education of occupational therapists, it is important that curricula and occupational therapy educators develop a broad knowledge of the workings of the Division of Education and maintain a strong link with it. An experience spent in the Division of Education at the headquarters of the American Occupational Therapy Association will allow the intern to gain insight and skills that will be useful to both the intern and the academic curricula with which she is associated.

The specific focus of this experience will provide, not only a learning experience for the intern, but also a learning product for the clinical supervisor. The intern will assume major responsibility for designing a training package for student supervisors.

Student fieldwork is an integral part of occupational therapy education and, as such, it falls within the purview of the Division of Education. Although there are currently well over 2500 therapists who supervise students on fieldwork, there is no coordinated effort to provide them with training in supervisory skills. Therapists are required to have a minimum of one year of clinical experience before they are eligible to supervise students. (In truth, even this minimum is sometimes waived.) It seems to be assumed that a therapist with one year of clinical experience is automatically a qualified supervisor. Although there have been some local workshops and graduate courses on supervision, many supervising therapists have never received training in supervisory skills. In an attempt to fill the gap, the Director of the Division of Education has expressed interest in a training module on supervisory skills to be used as an educational tool by interested groups (curricula, state and local associations, etc.). The intern's involvement in this training packet is described under Goal #3 (attached).

Prospectus (con't.)		
OBJECTIVE	EXPERIENCE	SKILLS
Goal #1: Understand responsibilities of, and relationship among, various divisions of the American Occupational Therapy Association		
CONCEPTUAL Learn goals of total organization. Understand responsibilities of each division. Analyze relationship of various divisions within AOTA.	Read relevant literature. Interview relevant people at AOTA. Read relevant documents. Discuss responsibilities with directors of each division. Discuss with appropriate people. Attend meetings. Observe day to day activities. Review interdepartmental communiques.	Summarize organizational goals. Distinguish among responsibilities of each division. Chart divisional responsibilities. Diagram vertical and horizontal structure of AOTA. Explain interdependencies of various divisions of AOTA. Cite evidence that demonstrates whether AOTA is a mechanistic or an organic organization.
Goal #2: Demonstrate Involvement in Selected Activities of Division of Education		
CONCEPTUAL Learn various responsibilities of Division of Education.	Read relevant documents. Interview personnel. Attend meetings. Observe day to day activities.	Explain activities of Division.

Prospectus (con't.)		
OBJECTIVE	EXPERIENCE	SKILLS
<p>CONCEPTUAL, continued</p> <p>Analyze duties of personnel.</p> <p>Acquire knowledge of organizational response to membership concerns.</p>	<p>Read job descriptions. Talk with staff. Observe and participate in day to day activities.</p> <p>Review actions taken in response to concerns and actions of recent (April) Commission of Education annual meeting.</p>	<p>Identify duties of each staff member. Distinguish responsibilities and hierarchical relationship.</p> <p>Summarize Division's plan of action for 1983-84.</p>
<p>HUMAN RELATIONS</p> <p>Interact with personnel of division.</p> <p>Assist personnel with selected tasks.</p>	<p>Discuss job responsibilities and assist where appropriate.</p> <p>Assume responsibility for selected tasks (see TECHNICAL below).</p>	<p>Develop collegial relationship.</p> <p>Cite evidence of participation.</p>
<p>TECHNICAL</p> <p>Participate in student recruitment.</p> <p>Prepare written materials.</p>	<p>Answer inquiries from potential students.</p> <p>Review Educational Bulletin in preparation. Revise materials as necessary.</p>	<p>Demonstrate ability to write satisfactory responses to students who inquire about occupational therapy.</p> <p>Edit materials to be included in Educational Bulletin.</p>

OBJECTIVE	EXPERIENCE	SKILLS
Goal #3: Develop Training Unit for Student Supervisors.		
<p>HUMAN RELATIONS</p> <p>Compile opinions regarding such a training unit.</p> <p>Use expertise of others.</p>	<p>Interview clinical supervisors, fieldwork coordinators, and students who have recently been supervised.</p> <p>Review work already produced by other occupational therapists relating to supervision.</p> <p>Determine who might best contribute to training unit.</p> <p>Contact appropriate persons and request their participation.</p>	<p>Cite content viewed as pertinent by others.</p> <p>Delegate responsibility.</p>
<p>TECHNICAL</p> <p>Determine critical components of training unit.</p> <p>Plan use of media.</p>	<p>Design needs assessment.</p> <p>Collect information about comparable training used in other professions.</p> <p>Gather data on such units of programs developed by other occupational therapists.</p> <p>Analyze responses to interview (HUMAN) above.</p> <p>Consult with expert in</p> <ol style="list-style-type: none"> 1) telecommunications 2) preparation of educational materials. 	<p>Synthesize information gathered.</p> <p>Identify desirable content areas of a training unit and justify their inclusion.</p> <p>Cite reasons for use of written manual and/or videotape.</p>

OBJECTIVE	EXPERIENCE	SKILLS
<p>TECHNICAL, continued</p> <p>Construct outline of two-day workshop for student supervisors.</p> <p>Design selected units of workshop.</p> <p>Coordinate total workshop.</p> <p>Plan evaluation of workshop.</p>	<p>Write outline. Discuss with members of Division of Education. Revise.</p> <p>Collaborate with media representatives. Write script for selected video-taped portions. Write selected portions of manual.</p> <p>Contact others to contribute. Specify guidelines for outside contributions. Schedule outside contributions. Consult with Division of Education staff.</p> <p>Design oral and written feedback procedure.</p>	<p>Produce written outline from which script and/or manual can be designed.</p> <p>Write manual and script that will facilitate the learning of supervisory skills.</p> <p>Organize total process of designing workshop. Determine and coordinate efforts of others.</p> <p>Prepare for formal appraisal of own work.</p>

APPENDIX B: LETTER AND QUESTIONNAIRE



The American Occupational Therapy Association, Inc.

Carolyn Manville Baum
PRESIDENT
James J. Garibaldi
EXECUTIVE DIRECTOR

April 1, 1983

Dear :

At least 2500 occupational therapists regularly supervise students on Level I and Level II fieldwork. To help therapists improve their supervisory skills, the American Occupational Therapy Association is considering developing a training module for supervisors and potential supervisors. This module would include video tapes and an instruction manual; and it could be used by interested groups, such as district associations, facility staff, curricula, etc. In its entirety, the workshop will probably include 10 to 12 hours of material.

During May and June (1983), I will be at AOTA doing my own fieldwork for a specialist degree in education and I will be involved in the design of this training module. I am beginning by seeking input from a limited group of therapists about the most desirable content of such a program. The basic question is simple: What information and experiences are most critical in a training module on supervision? I ask you to consider your own experience and that of other therapists that you have observed and with whom you have discussed student supervision.

Please take about 10 minutes to complete the enclosed questionnaire. I would be happy to have you include additional suggestions and comments. A stamped, addressed envelope is included for your convenience. If you would like to talk to me about this project, I can be reached at (616) 342-1331. I can also be contacted at the COE meetings in Portland.

I welcome your response, and I thank you for your cooperation.

Yours truly,

Claire Callan

Claire Callan, M.A., OTR
Fieldwork Coordinator
Western Michigan University

CC/jh
Enclosures

COMPLETE QUESTIONNAIRE BY
DESIGNATING A 1, 2, OR 3 PRIORITY FOR EACH ITEM

1 = high priority

2 = moderate

3 = delete

In designing a workshop for supervisors of occupational therapy students, I would give priority to the following content areas:

Advantages and disadvantages of maintaining a fieldwork program

Meeting AOTA Standards.

Overview of Competency Based Education.

Performance objectives:

Why written objectives are important to have

Determining objectives for the experience at your center.

How to write objectives.

Relevance of objectives to the evaluation of the student

Involving the student in commitment to performance objectives.

Designing learning activities to reach objectives.

Supervisor-student interaction:

Collaborating on the experience. Involving the student.

Relating supervision to the maturity level of the student.

Communicating with the student

Giving feedback, positive and negative

Direct and indirect supervisory styles

Teaching:

Assessing level of individual student learning

Clarifying expectations.

Teaching problem solving

Transferring learning from one situation to another.

Classroom to clinic: Is there a gap? Analyzing and bridging it.

Evaluation of student:

Counseling and judging: a dual purpose.

Individual learning plans based on student evaluation.

The evaluation conference.

When your view of student performance conflicts with the student's.

Multiple uses of a fieldwork evaluation instrument

Preparing the student manual.

Organizing student orientation.

Problems most frequently encountered when supervising students.

Retention and Dismissal Issues.

Interactions with academic programs

Thank you. Please return by April 15th to:

Claire Callan, M.A., OTR
Occupational Therapy Department
Western Michigan University
Kalamazoo, MI 49008

APPENDIX C: QUESTIONNAIRE TALLY

COMPLETE QUESTIONNAIRE BY
DESIGNATING A 1, 2, OR 3 PRIORITY FOR EACH ITEM

1 = high priority

2 = moderate

3 = delete

In designing a workshop for supervisors of occupational therapy students, I would give priority to the following content areas:

	1	2	3
Advantages and disadvantages of maintaining a fieldwork program.	13	24	8
Meeting AOTA Standards.	18	21	3
Overview of Competency Based Education.	21	16	4
Performance objectives:			
Why written objectives are important to have.	24	14	4
Determining objectives for the experience at your center.	28	14	2
How to write objectives.	28	14	
Relevance of objectives to the evaluation of the student.	30	14	
Involving the student in commitment to performance objectives.	31	11	
Designing learning activities to reach objectives.	29	10	
Supervisor-student interaction:			
Collaborating on the experience. Involving the student.	32	9	
Relating supervision to the maturity level of the student.	33	7	
Communicating with the student.	36	6	
Giving feedback, positive and negative.	38	6	
Direct and indirect supervisory styles.	30	11	
Teaching:			
Assessing level of individual student learning.	27	14	1
Clarifying expectations.	34	9	1
Teaching problem solving.	30	12	
Transferring learning from one situation to another.	32	11	
Classroom to clinic: Is there a gap? Analyzing and bridging it.	23	19	
Evaluation of student:			
Counseling and judging: a dual purpose.	28	13	
Individual learning plans based on student evaluation.	24	15	1
The evaluation conference.	24	18	
When your view of student performance conflicts with the student's.	32	10	
Multiple uses of a fieldwork evaluation instrument.	17	24	1
Preparing the student manual.	11	27	4
Organizing student orientation.	13	26	4
Problems most frequently encountered when supervising students.	35	5	2
Retention and Dismissal Issues.	31	17	
Interactions with academic programs.	17	23	2

Thank you. Please return by April 15th to:

Claire Callan, M.A., OTR
Occupational Therapy Department
Western Michigan University
Kalamazoo, MI 49008

APPENDIX D: LETTER OF CONFIRMATION



The American Occupational Therapy Association, Inc.

Carolyn Manville Baum
PRESIDENT
James J. Garibaldi
EXECUTIVE DIRECTOR

May 13, 1983

Dear :

Thank you for your willingness to participate in the design of a workshop for clinical educators. I want to confirm that we will meet on Wednesday, May 18, 1983 at 1:00 p.m. in the 2nd floor, Conference room, at the AOTA National Office. Lunch will be served.

So you will know what we will be discussing, I have enclosed a copy of the original questionnaire along with a tally of the respondents' answers. In view of their ranking, Stephanie Presseller and I have decided to begin with a unit on supervisor-student interaction. "Problems most frequently encountered" will be used to illustrate the interactions.

I look forward to meeting with you.

Yours truly,

A handwritten signature in cursive script that reads 'Claire Callan'.

Claire Callan, M.A., OTR

CC/al

Enclosures

APPENDIX E: TRAINING UNIT FOR CLINICAL EDUCATORS, FIRST DRAFT

Manual will include information about:

Organization of course

4 (?) units, approximately $\frac{1}{2}$ day each

General goals

Learning activities (general description)

Information about care and use of videotape

Information about use of manual

Assumptions about participants

Occupational therapists?

Want to train clinical students

Have administrative support

Unit I

Organization

3 hours (excluding one break)

2 sub-units

Goal, objectives

Concepts within unit

Topics for discussion (will relate to videotape)

Learning activities (description)

Thorough notes for leader to use for introduction and closures for each sub-unit

General Problems

O.T. specific or health care generic?

Wise to focus on problems of students?

Number of participants limited?

Small groups for both halves (time consuming and repetitious).

Assumptions about participants.

UNIT GOAL: Participant will understand selected elements of
effective supervisor-supervisee interaction

A. Collaboration between supervisor and student

Objectives: Participant will be able to:

- describe use of collaborative effort to supervise student performance
- prepare a collaborative sequence
- use a collaborative approach

<p>PRESENTATION POINTS (for leaders)</p> <p>1. Desirability of working <u>with</u> student.</p> <p style="padding-left: 20px;">a. Investment</p> <p style="padding-left: 20px;">b. Collegiality</p>	<p>SUGGESTIONS/PROBLEMS</p> <p>Could first show videotape or use written paragraph illustrating process; non-OT situation, e.g., parent and child. Participants identify critical steps. (Discovery)</p> <p>Other reasons it's important to work with students.</p>
<p>VIDEOTAPE showing student and supervisor doing points 2-6.</p>	<p>Situation? ADL? Interview? Communication with other professional?</p>
<p>2. Supervisor's general goals. Need affirmation by student.</p> <p style="padding-left: 40px;">Adjustments</p> <p style="padding-left: 40px;">Additions</p> <p>Ex. goal: student will demonstrate initiative.</p>	<p>(Problem) I'm running into content of other units (relating experience to maturity level of student) since the less mature or assertive student is less able to do this.</p> <p>Other goals to use as examples.</p>

PRESENTATION POINTS

3. Manner of achieving goals--prompt as much from student as possible.

Questions for group discussion:

How would student show you initiative?
How demonstrate other sample goals?

What about student who identifies only inappropriate behaviors? Or none?

4. Agreeing with student about what will be observed. Use examples.

Need to develop trust so student will ask you to observe the "hard ones."

5. Analyze together

LIVE VIGNETTE: Two leaders agree beforehand on a behavior. One (acting as student) does it. Then both sit down and analyze.

6. Development Plan

Objective
Method
Target date

SUGGESTIONS/PROBLEMS

Other questions for discussion.

Examples based on #3.

How can we illustrate this?

Do we need a script for this? Or should it be on video?

Example

SMALL GROUPS

1. Instructions:

- a. One person be supervisor, one student, others observers.
- b. Select a goal.
- c. Go through steps 2-6 above.
- d. Observers actively assist. Help "student" decide on which behavior will demonstrate fulfillment of goal; help "supervisor" to encourage "investment;" help both to analyze and design development plan.
- e. Give each other feedback.

2. Activity.

3. Closure. Leaders help identify what went right and where problems occurred.

SUGGESTIONS/PROBLEMS

Should we provide goal?

Do we need a video or some sort of example of how this small group involvement might work?

Numbers in group.

Deciding who will be supervisor, student.

Is group too uncohesive for this type of activity?

Reverse roles?

Closure - return to large group or have facilitators visit small groups.

UNIT GOAL: Participant will understand selected elements of
effective supervisor-supervisee interaction

B. Relating supervision to maturity level of student

Objectives: Participant will be able to:

- explain how supervision can be linked to the maturity level of the student
- give examples of the above
- suggest appropriate supervisory strategies based on student maturity

* Illustrate this unit with a "problem most frequently encountered:" the dependent student

<p>VIDEOTAPE: Different students in same situation (e.g., preparing for patient treatment), but each acting at a different level of maturity.</p>	<p>SUGGESTIONS/PROBLEMS</p> <p>Situations, e.g., presenting report at staff meeting, identifying community resources, leading group.</p> <p>Levels: examples of behaviors.</p>
<p>PRESENTATION POINTS</p> <p>Recognition of Level: - - - - -</p> <p>"Life Cycle Theory" using high task, low task. More immature student--more task, structure, lots of information. As student matures, can decrease structure, use relationship. Very mature student might be able to work autonomously--lack of structure, depend upon long term relationship.</p>	<p>Identify behaviors you look for to determine level of maturity.</p> <p>Do we want to use Fidler's scale? Condense it? Forget it? Perry Scheme?</p> <p>10 minute lecture? On tape? Too dull?</p> <p>Are we getting into more than we need to here?</p>

PRESENTATION POINTS

Sequencing supervision (using dependent student):

1. Low level of independence

Help student function without supervision
activity student already knows
success likely
occasional observation
reinforce; correct only if necessary
Emphasis on the task - something the student knows

2. Teaching new skills--relationship to you and task

3. Intermediate level of independence

Give necessary practice in learned skills.
"Practice" relates to task; "learned" relates to you.

Increases ability to function independently, plus increases speed, ease, etc.

4. Higher level of independence

Activities to encourage creativity and new learning.

Extends self direction and achievement.

SUGGESTIONS/PROBLEMS:

Needs concrete examples

Or could we depend on examples for audience?

Too much lecture?

Am I confusing things by doing the "high task relationship" bit and then shifting to example of dependent student?

<p>VIDEOTAPE:</p> <ol style="list-style-type: none">1. Supervisor expecting creative activity of dependent student.2. Finding success activity for student.3. Allowing practice for newly learned activity.4. Allowing too much routine activity for independent student.5. Encouraging creative activity.	<p>SUGGESTIONS/PROBLEMS</p> <p>Will it be evident that 2, 3, 5 are positive; 1 and 4 negative, or will viewer be confused?</p> <p>Maybe should use videotape <u>before</u> "Sequencing supervision" (p. 3)?</p> <p>If keep here, use voice-over to link activity to levels of independence.</p> <p>If use earlier, have audience "discover" link.</p>
<p>GROUP ACTIVITY</p> <p>Groups of 20 with one facilitator.</p> <p>Each group has a narrative description of a dependent student.</p> <p>Plans strategy.</p> <p>Shares strategy with total group?</p>	<p>Should each group have same situation or different one?</p> <p>Share or not?</p> <p>Should we use problem(s) other than dependency at this point (still relating to maturity level though)?</p> <p>If so, some suggestions.</p>

UNIT GOAL: Participant will understand selected elements of
effective supervisor-supervisee interaction

C. Elements of Communication

Objectives: Participant will be able to:

- Identify elements of clear communication
- Apply elements to practical situation

* Illustrate this unit with "problem most frequently encountered:" the student who has just had a negative experience, e.g., being unprepared and subsequent reaction by patient or family, or patient unwilling to come to treatment.

VIDEOTAPE: Enactment of negative experience.	SUGGESTIONS/PROBLEMS
	Which is?

PRESENTATION POINTS

Response to video

- | | |
|---|---|
| 1. Ask audience to write down how they would deal with situation, <u>OR</u> | Wouldn't it be best to use positive experience as base? |
| 2. List several alternative actions and ask audience to choose. (More than one might be correct.) | |

VIDEOTAPE A: TWO SCENARIOS

Student having negative experience, supervisor handling it badly (bearing down, acting as if not important, withholding support).

Begin with some examples of "catching student doing something right;" then negative experience, then open examination of it.

PRESENTATION POINTS

3. Have audience identify communication elements in scenarios.

Script	Elements
a. "What do you think went wrong?"	Active listening, direction, responsibility.
b. Paint objective picture. Go over notes with student.	Objectivity, clarity, feedback.
c. Ask student for suggestions for change.	Involvement, respect, trust.
d. Get commitment to change.	Involvement, expectations.
e. Plan.	
f. Resummarize. Clarify.	Repetition, clarity.
g. Give recognition.	Focus on incident.

SUGGESTIONS/PROBLEMS

Some elements of these scenarios.

Actual situation to use in videotape.

PRESENTATION POINTS	SUGGESTIONS/PROBLEMS
<p>4. Question for discussion: What if student can't identify components of situation? Or refuses to accept?</p>	<p>Other discussion questions.</p>
<p>SMALL GROUPS</p> <p>Instructions (as in #A)</p> <p>Provide groups with a "situation," i.e., a student who has just had a negative experience.</p> <p>Closure: return to large group to share ways of handling situation.</p> <p><u>OR</u> VIDEOTAPE B:</p> <p>Therapist practicing good communication skills with patient who is demoralized because he can't do something.</p> <p>3. Have audience identify communication skills.</p> <p>Videotape showing same therapist using poor communication skills with student who just experienced a failure.</p> <p>4. Discuss and rewrite as a group.</p>	<p>The situation.</p> <p>The same one for all groups or a variety?</p> <p>Put on videotape or just narrative description on paper?</p> <p>What?</p> <p>Situation?</p> <p>Some elements of poor communication.</p> <p>One large group or smaller?</p> <p>If smaller, return to large group to share? Do we need to go into fact that student is not a patient?</p>

UNIT GOAL: Participant will understand selected elements of
effective supervisor-supervisee interaction

D. Feedback

Objectives: Participants will be able to:

- appreciate importance of feedback
- recognize several types of feedback
- use feedback in several different situations

PRESENTATION POINTS	SUGGESTIONS/PROBLEMS
<p>Feedback:</p> <p>1. Knowledge of results</p> <ul style="list-style-type: none"> a. Lets student know if doing right or wrong. b. If right, what's right about it? c. If wrong, what's wrong? d. What to do to improve performance. e. Should include opportunity to practice. 	<p>Too basic?</p>
<p>VIDEOTAPE A:</p> <p>Brief triggertapes, e.g., Student: "Hi, Mr. Johnson. It's time to begin your therapy." Patient rolls eyes. Supervisor looks out window.</p>	<p>Suggestions for content.</p> <p>Should we use triggertapes before any didactic material?</p>

PRESENTATION POINTS

2. Elicit response to videotapes from audience.
 - a. Identify feedback that was given.
 - b. Suggest how student felt.
 - c. What might supervisor have done.
3. Base on results of attainment in specific tasks. Use objective description. Examples based on triggertapes.
4. Purpose of feedback: to learn knowledge, skill or attitudes; to maintain mastery.
5. Types: verbal - non-verbal, positive-negative, intrinsic-extrinsic. Examples based on triggertapes.

VIDEOTAPE B:

Therapist-student. Begin showing therapist "catching student doing something right." Narrator explaining that therapist makes opportunity to give positive feedback. Go on to longer session where some things go right, some things wrong. Feedback (debriefing) session afterwards includes:

"How do you feel session went?" Recognizing the positive; beginning of intrinsic feedback.

Repetition by therapist.

SUGGESTIONS/PROBLEMS

Can we do this with a large group?

Other types I should include?

Suggestions for content of this videotape.

VIDEOTAPE B:

Goes through situation ("first you did...").
Confirms correct choices.

Has positives transfer into other situations
(e.g., "so when you run into problems like
that, you need to adapt your instructions to
the patient").

First gives student opportunity to catch
negatives. Supervisor suggests ways to
improve if student can't.

SUGGESTIONS/PROBLEMS

PRESENTATION POINTS

6. Participants identify points above. Will
probably need direction from leaders.
7. Feedback as used above was for the
purpose of learning, was mostly positive,
was mostly extrinsic.
8. To maintain mastery, need not be so
detailed.
9. Once student gains mastery, can move
more and more to intrinsic feedback.

Situation for videotape above.

VIDEOTAPE C:

Maintaining mastery: same student and
therapist, brief enactment of same situation.
Therapist saying "You're continuing to do a
good job of _____."

VIDEOTAPE C:

Intrinsic feedback: Student thinking e.g., "Hey, my treatment session with Mr. Kelly went off without a hitch today. I had the materials all ready, I was able to adapt the directions when necessary, resting revealed some relevant information, I directed the situation so he felt positive about his progress."

SUGGESTIONS/PROBLEMS

10. Negative feedback should take the form of information about improvement needed.

Is this too broken up? Should I, for instance, put videotapes C & D together and have discussion points 10 and 11 afterwards?

VIDEOTAPE D: TWO SCENARIOS

- a. Student pushes wheelchair up to table, Forgets to put brakes on. As patient starts to stand, chair begins to roll back. Therapist intervenes. Later, therapist states: "I don't know what's the matter with you. You know that you always should...."

Narrator: Such negative feedback which focuses on the person only increases anxiety and defensiveness and gets in the way of learning.

<p>VIDEOTAPE D: TWO SCENARIOS</p> <p>b. Same situation as above. Later supervisor states: "Might leave brakes off if testing patient's alertness. However, you weren't." Priority of patient's safety needs. Has student practice. Asks that student practice several times with fellow student. Asks if student will be responsible for setting brakes in future.</p>	<p>SUGGESTIONS/PROBLEMS</p> <p>Is it worth breaking tape for live comments or should 10 be done by narrator on tape?</p>
<p>11. Identify elements in feedback scenario.</p> <p>a. Attacks person of student. Doesn't provide for learning.</p> <p>b. Dignifies correct behavior by stating under what conditions it might be acceptable; allows student to practice; holds student accountable.</p>	<p>Can total group do this?</p>
<p>GROUP ACTIVITY</p> <p>Instructions as in #A.</p> <p>Student-patient; Student gives patient directions about care of piece of equipment (use printed directions). Supervisor gives feedback on performance. Use checklist for recording feedback, e.g., "facial expression, posture, etc."</p>	<p>Other suitable situations besides care of equipment. (Must be easy to roleplay without advance notice.)</p>

APPENDIX F: TRAINING UNIT FOR CLINICAL EDUCATORS, SECOND DRAFT

Training Unit for Clinical Educators, Second Draft

SUPERVISION

Shared decision-making process, leading to
Increased effectiveness which
Increases independence and satisfaction.

When viewed this way, independence and satisfaction are based on the accomplishment of meaningful work. The relationship between effectiveness, independence and satisfaction then becomes circular.

Purpose (why important)

To improve quality of care
To provide opportunity for growth
To lead toward independence
Others?

Role

Supervisor is the key figure in enabling the student to achieve the goals above. (May want to allude to Christie study.)

Style of Supervision

In general, follow pattern above.
Immediate style will vary with supervisor, student and circumstance. Use own examples of several different styles necessitated by differing situation or by student at different level. All examples are directed toward similar goal.

Many elements can be considered when viewing supervision, e.g., learning styles, objectives, evaluation.

This unit will deal with one: communication.

COMMUNICATION — transfer of meanings from one person to another

Why is it so important?

Ask participants to think about their own fieldwork (the one thing they have in common is that they all did affiliations) and write down one instance of good or bad communication they had with their supervisor.

Ask them to share.

Put some on board.

Draw reasons for importance from examples, e.g., "Supervisor casually asked me if I wanted to join her for lunch on first day." Made you feel comfortable, accepted.

Two aspects of communication: Collaboration and feedback

Others important (e.g., empathy, trust). Cannot be covered in three hours. Will be touched on indirectly as they relate to collaboration and feedback.

Collaboration

Working with student to establish the learning experience.

What it means to others. Why it's important.

VIDEOTAPE: brief vignettes with therapists responding to the above points (meaning and importance). Check logistics and expense of taping this.

OR: Ask participants to write down on paper what collaboration means to them, take answers from 5-6.

Pull definition out.

Explanation of organization of session. (What's going to happen.)

(Question: Should we put a video of a collaborative discussion here? Or at spot marked *, or incorporate it into group activity explanation tape**? Probably needs AV input.)

VIDEOTAPE (collaborative discussion): Student receives notice her patient is going to be discharged that afternoon. Works with supervisor on prioritizing.

Points for Presentation

Climate that promotes a collaborative relationship. Destroys it.

Reasons why it's a good thing. Payoffs.

Need to establish appropriate goals with student.

meaningful
realistic
contribute to student's effectiveness as a therapist
helpful to include: invitational statements, time referenced statements, positive comments

Agreement on behaviors that will demonstrate achievement of goals.

Development plan.

*

Possible questions for discussion

the autocratic supervisor

the student who wants to be told what to do

is an autocratic style ever appropriate?

conflict between supervisor and student. Student's goals are not acceptable to supervisor

the threatened supervisor

Group Activity

Instructions

Break up into groups of ____.

Tell where each group will go. What time to be back.

Helpful to have facilitator in each group.

In groups, one person will act role of supervisor, one will be student, others assistants. Assistants are to actively help, i.e., to help student and supervisor determine most effective collaborative approach, give feedback, reenact when desirable. Agree on "one important principle" of collaboration as a result of your role play.

****VIDEOTAPE:** Use video to clarify instructions. Portray group doing group activity. Someone playing role of supervisor, student, group facilitator. Others are assistants. Enact collaborative approach with assistants and facilitator participating.

Situation: student uncertain about how to deal with controlling patient. Supervisor and student talk about it.

Participants given description of a situation on slip of paper.

Sample situations: Deciding upon an appropriate evaluation tool.
Supervisor talking with student who allows self to be "leaned on" by other professionals.
Anxious supervisor and anxious student working on how they can collaborate.

Rotate roles if time allows. (Could use new situation or not)
Agree upon one important principle of collaboration that was made evident through your role play.
Return to large group.

Share "one important principle" with total group.

To leader: May need to curtail sharing activity because of time.

However, it is necessary to somehow bring closure to collaboration session. Group has to know what they learned. Need to extract principles from group activity.

Principles on board.

Feedback

Distribute questionnaire on feedback. Give participants time to answer. Not to be turned in. For consciousness raising.

I need to (Item):	<u>Need more of</u>	<u>About right</u>	<u>Need less of</u>
Be specific	_____	_____	_____
Let others know when I don't understand	_____	_____	_____
Encourage feedback from others	_____	_____	_____
Etc.			

Feedback: knowledge of results

Lets student know if doing right or wrong

If right, what's right about it?

If wrong, what's wrong?

What to do to improve performance

Should include opportunity to practice

Give example including five points above.

VIDEOTAPE: Brief triggertapes, e.g.,

Student: "Hi, Mr. Johnson. It's time to begin your therapy."

Patient rolls eyes. Supervisor looks out window.

Supervisor abruptly takes over task from fumbling student.

Another.

Elicit response to videotapes from audience.

Identify feedback that was given

Suggest how student might have felt

What message would supervisor want to convey in such a situation?

How might it best be done? Alternative means?

(Option 1)

VIDEOTAPE: Longer videotape (10 mins.)

Instruction (on tape): People are better able to respond to feedback that is based on results of attainment in specific tasks and that is given in the form of objective description.

Two simulations:

supervisor giving student subjective feedback

supervisor giving student objective feedback

(Note: Instruction will consist of narration and/or titles on tape.)

Instruction: Feedback is given to enable the learner to gain knowledge, skill or attitude and to maintain mastery. Feedback can be intrinsic or extrinsic. Intrinsic feedback is inherent in the task. It is obtained through the senses and is immediate.

Simulation: Pot boiling over; therapist doing something successfully.

Instruction: feedback does not originate in the task, but comes from an external source.

Simulation: Audience applauding; student being praised by supervisor.

Instruction: Learners require more extrinsic feedback than do people who have gained mastery. Students who learn to recognize and use intrinsic feedback will maintain mastery. The supervisor can promote mastery by withdrawing extrinsic feedback in an organized manner and by helping the student to recognize intrinsic feedback.

Simulation: dramatization of the last point.

(Option 2)

VIDEOTAPE: Dramatization comprised of the four simulations above.

Encourage audience to identify points contained in the Instruction above.

Collect on chalkboard.

(Option 3) (This one does not focus on intrinsic-extrinsic)

VIDEOTAPE: Student interviewing patient to assess skill at meal preparation (include some positive and some negative points).

Audience (could break into small groups or use total audience) determine what the most effective feedback on the student's performance would be and how it could best be given.

One person in group (may need to be group leader) will roleplay giving the feedback that the audience designed; another will roleplay the student. Both will share how they felt about giving and receiving the feedback.

Negative Feedback

Have audience think about and suggest how they can best accept negative feedback. Collect answers on chalkboard.

Give audience a situation: e.g., Your student has put several patients at risk. You are considering termination. Student has done well academically; knows theory well; however, after six weeks is still unable to apply it in the clinic.

Activity: Practice giving negative feedback in the given situations using various circumstances or methods listed on board. This activity can be structured in several ways:

Small groups as described under "Collaboration."

Two people getting in front of large group and role playing supervisor and student.

Role playing it with person sitting next to you.

In all cases, have student share how they feel about receiving and supervisor about giving negative feedback.

Closure: something that relates the collaboration before and the feedback after student performance.

APPENDIX G:

LETTER AND TRAINING UNIT FOR CLINICAL EDUCATORS, THIRD DRAFT



The American Occupational Therapy Association, Inc.

Carolyn Manville Baum
PRESIDENT
James J. Garibaldi
EXECUTIVE DIRECTOR

June 1, 1983

Dear :

Preparing these materials took several days longer than I had anticipated. I apologize for the delay. This is an outline draft. Parts of it need to be fleshed out; other parts need to be condensed; and all of it needs to be refined.

I have asked you specific questions in the right hand column. I would like your general input on the following:

Could you, as a leader, work from an outline such as this?
What items would not be clear to the leader?
What needs to be added?
What should be deleted? (This is especially important since there is 4 to 5 hours of presentation material here. I'd like to get it closer to 3.)
Any suggestions you would like to add about activities, etc., will be cherished.

I've enclosed two copies. Feel free to give me feedback by writing your thoughts all over one and returning it to me. You could also telephone me at extension 203. If you have time, and would like to go over the materials in detail, I would be happy to meet with you at your department. It would be most helpful for me to do this with one or two reviewers.

I hope you can respond quickly. I will be leaving Washington on the 10th. Obviously, there's a long way to go on this project, but it would be helpful if I had your feedback before I leave.

Thank you again for your time and cooperation.

Yours truly,

Claire Callan, M.A., OTR

CC/jh

Enclosures

1383 Piccard Drive

Rockville, Maryland 20850

(301) 948-9626

WORKSHOP FOR CLINICAL EDUCATORS (DRAFT OUTLINE)

UNIT I: COMMUNICATION

Presentation Points--regular type <i>Directions to leader--script type</i>	QUESTIONS/REMARKS FOR REVIEWERS
<p>Introduction 5 to 8 minutes</p> <ul style="list-style-type: none"> Introduction of self Reason for workshop. Why important Objectives Organization of unit Link among units 	→ TO BE DEVELOPED
<p><i>This next section on general supervision represents an introduction to the total workshop. It forms an umbrella, and it can be used with any of the units.</i></p>	
<p>A. SUPERVISION 15 minutes</p> <p><u>Theoretical base</u></p> <ul style="list-style-type: none"> Shared decision-making process between supervisor and student, leading to Increased effectiveness of student performance, which Increases student independence and satisfaction 	MAY NOT AGREE WITH THEORETICAL BASE
<p><i>Show transparency to illustrate this point.</i></p> <p>When viewed this way, independence and satisfaction are based on the accomplishment of meaningful work. The relationship between effectiveness, independence and satisfaction then becomes circular.</p>	
	<p>ARE "PRESENTATION POINTS" SUFFICIENTLY CLEAR FOR LEADER OR DO I NEED MORE DETAIL?</p>

<u>Purpose</u>	QUESTIONS/REMARKS FOR REVIEWERS
<p><i>Knowing why supervision is important provides a rationale and motivation. Begin by eliciting the perceptions of the participants of the purpose of supervision.</i></p> <p>To improve quality of care To provide opportunity for growth To lead toward independence Others</p>	<p>DOES THIS SEQUENCE MAKE SENSE?</p> <p>ANYTHING THAT SHOULD BE ADDED? DELETED?</p>
<p><u>Role of the Supervisor</u></p> <p>Supervisor is the key figure in enabling the student to achieve goals of increased effectiveness, independence and growth. <i>You may want to allude to Christie-Joyce-Moeller study.</i> Influences student to look at self and provokes growth, change.</p>	
<p><u>Style of Supervision</u></p> <p>In general, follow pattern above under theoretical base. However, immediate style will vary with supervisor, student and circumstance. <i>Use own examples of several different styles necessitated by differing situation or by student at different level.</i> <i>E.g., emergency situation might require autocratic style.</i> <i>("Grab John. He's falling.")</i></p>	<p>SUPERVISORY STYLE IS A BIG TOPIC. SHOULD IT BE DELETED SINCE THERE IS NOT ROOM TO DEAL WITH IT ADEQUATELY?</p> <p>THERE ARE MANY SUPERVISORY THEORIES AND STYLES. WILL IT BE CONFUSING AND/OR BORING TO BEGIN WITH A 15 MINUTE "LECTURE" ON THE SUBJECT?</p>
<p><i>End of introductory remarks about supervision. Transition to specific topic of this unit: communication. Might wish to insert experience of your own as a supervisor, especially as that experience relates to communication.</i></p> <p>Many elements can be considered when viewing supervision, e.g., learning styles, objectives, evaluation. This unit will deal with one: <u>communication</u>.</p> <p>Explanation of organization of unit.} - - - - -</p>	<p>→ TO BE DEVELOPED.</p>

B. COMMUNICATION (20 minutes)

Definition: transfer of meanings from one person to another.

Why is it so important?

Ask participants to think about their own fieldwork (one thing they have in common is that they all did affiliations), and write down one instance of good or bad communication they had with their supervisor.

Remind them to consider both verbal and non-verbal.

Ask them to share their memories.

Put some responses on chalkboard.

Draw reasons for importance from examples (e.g., If someone says that the supervisor asked for his/her opinion about treatment activities, you could infer that that made the student feel accepted, valued).

Two aspects of communication will be considered: collaboration and feedback.

Show transparency

Other elements of communication, e.g., empathy and trust, are also important; but cannot cover everything in three hours.

One element affects the other and it would be impossible to separate completely even if wanted to. Therefore, other elements will be touched upon indirectly as they relate to collaboration and feedback.

QUESTIONS/REMARKS
FOR REVIEWERS

PREFERABLE PHRASING IN THIS
"LEADER'S OUTLINE:" 1st
PERSON ("EVEN IF I WANTED TO"),
2nd PERSON ("EVEN IF YOU WANTED
TO"), OR "PERSONLESS" ("EVEN IF
WANTED TO") AS I HAVE IT?

Why collaboration and feedback were chosen: linkage showing collaboration initiating student performance, and feedback coming out of it, and leading to further collaboration.

Brief stretch break.

Collaboration (1½ hours)

Working with student to establish the learning experience.
Explanation of organization of session. (What's going to happen in the next hour-plus.)

What collaboration means. Why it's important.

Put on videotape.

VIDEOTAPE: Brief vignettes with prominent therapists talking about meaning and importance of collaboration.

OR: GROUP ACTIVITY: *ask participants to write down on paper what collaboration means to them. Take answers from 5-6.*

Elicit definition of collaboration from participants based on above video or group activity and their own experience.

Visualization of what a collaborative session looks like.

Put on videotape.

VIDEOTAPE: Student receives notice her patient is going to be discharged that afternoon.
Works with supervisor on setting priorities.

QUESTIONS/REMARKS

TO BE DEVELOPED. ANY THOUGHTS YOU HAVE WILL BE HELPFUL.

CHECK LOGISTICS AND EXPENSE OF TAPING THIS WITH A-V.

NEED SCRIPT.

SHOULD THIS VIDEOTAPE BE PLACED HERE? OR AT LATER POINT MARKED *? OR SHOULD IT BE INCORPORATED INTO GROUP ACTIVITY EXPLANATION TAPE AT POINT **? (ALSO, GET A-V INPUT INTO WHICH IS MORE EFFECTIVE FOR LEARNING-- ONE LONG TAPE OR SEVERAL SHORT ONES.)

	QUESTIONS/REMARKS
Use examples from your own experience to illustrate the presentation points on this page.	
Climate that promotes a collaborative relationship. Destroys it. environmental non-verbal verbal	HOW MUCH ON THIS PAGE NEEDS TO BE DEVELOPED FURTHER? HOW MUCH CAN THE LEADER CONTRIBUTE WITHOUT DIRECTION?
Reasons why collaboration is a good thing. Some payoffs.	
Need to establish appropriate goals with student. meaningful realistic contribute to student's effectiveness as a therapist Helpful to include: invitational statements time referenced statements positive comments	EXAMPLES OF THESE WILL BE FURNISHED.
The need to agree on behaviors that will demonstrate achievement of goals. Student will have greater investment in achievement of goals if he/she identifies behaviors. Give the audience a hypothetical goal. Ask them to assume the role of a student and to suggest some behaviors that they could present to demonstrate progress toward that goal.	DO I NEED TO DEFINE GOALS? OBJECTIVES?
Development plan relating to these behaviors. Example	

*? Videotape

Possible issues for discussion (*optional. Better used if group is less than 20*)

the autocratic supervisor
is an autocratic style ever appropriate?
the student who wants to be told what to do
encouragement of student-generated collaboration
conflict between supervisor and student. Student's goals
are not acceptable to supervisor.
the threatened supervisor

Group Activity: collaborative discussion

Instruct participants as follows:

Break up into groups of _____.
Tell where each group will go. What time to be back.
Purpose of activity is to design and enact a collaborative discussion.
Designate a facilitator in each group.
A videotape will be shown in a moment to clarify procedure in groups.
Groups will receive a "situation" written down on a piece of paper.
Group will then design a collaborative discussion between supervisor and student based on that situation. Will outline what supervisor might say, likely student responses, etc.
One person in group will then act as supervisor, another as student to "try out" the outline.
The rest of the group will actively assist during the enactment, i.e., interrupt when appropriate to help student and supervisor determine most effective collaborative approach, give feedback, reenact when desirable.
Student and supervisor share what the collaboration "feels" like.

QUESTIONS/REMARKS

COULD INSERT VIDEOTAPE
ALLUDED TO ON PAGE 4 HERE?

DIRECTIONS AND DESCRIPTION
FOR THE GROUP ACTIVITY
NEED TO BE STREAMLINED
(DESPERATELY!). ANY IDEAS?

I'M IN TROUBLE WITH THIS
ACTIVITY.

IT WOULD WORK MUCH BETTER IN
TRIADS---SUPERVISOR, STUDENT,
OBSERVER---BUT THAT WOULD MAKE
TOO MANY GROUPS. I COULD GIVE
DIRECTIONS FOR TRIADS AS AN
ALTERNATIVE, BUT THE VIDEO-
TAPE (BELOW) SETS IT UP IN
LARGER GROUPS.

	QUESTIONS/REMARKS
<p>Rotate roles if time allows (<i>Can use different situation or the same one.</i>)</p> <p>Agree on one "important principle of collaboration" as a result of your role play.</p> <p>VIDEOTAPE: (<i>The videotape is an enactment of the above instructions</i>)</p> <p>Group doing the activity outlined above.</p> <p>Given situation: student uncertain about how to deal with a controlling patient.</p> <p>Group discusses how student and supervisor might build a collaborative approach to the problem.</p> <p>Outline dialogue.</p> <p>Etc., etc., The process described above is enacted.</p> <p><i>Give participants a description of a situation on slip of paper.</i></p> <p>Sample situations:</p> <p>Deciding upon an appropriate evaluation tool.</p> <p>Supervisor talking with student who allows self to be "leaned on" by other professionals.</p> <p>Anxious supervisor and anxious student working on how they can collaborate.</p> <p>Now break into small groups for Activity.</p> <p>When finished return to large group.</p> <p><i>Elicit principle of collaboration identified in small groups. Put on chalkboard.</i></p> <p><i>(It may be necessary to curtail the sharing activity because of time. However, it is important to bring closure to the collaboration session. The group has to know what they have learned. They should be able to extract principles from the group activity.)</i></p>	<p>ANY OTHERS THAT WOULD FIT WELL HERE?</p> <p>**COULD EXPAND VIDEOTAPE REFERRED TO ON PAGE 4 TO FIT IN HERE. IF SO, THERE WOULD BE ONE LONGISH VIDEO IN THE SECTION ON COLLABORATION IN ADDITION TO THE SHORT ONE THAT HAS THE PROMINENT OT'S DEFINING COLLABORATION.</p> <p>PLEASE LOOK OVER THESE PAGES AND DECIDE IF THERE SHOULD BE A SEPARATE TAPE DEPICTING A COLLABORATIVE SESSION AND ANOTHER ONE DESCRIBING THE GROUP ACTIVITY, OR SHOULD THEY BE COMBINED?</p>

QUESTIONS/REMARKS	
<p>20 minute refreshment break.</p> <p><u>Feedback</u> (1½ hours)</p> <p>Introduction</p> <p>Importance of feedback Objectives of unit Organization of session</p> <p>Distribute questionnaire on feedback. Give participants time to complete. Questionnaire is not to be turned in, but is for consciousness raising.</p>	<p>DO YOU HAVE A DIFFERENT GROUP ACTIVITY TO SUGGEST?</p> <p>TO BE DEVELOPED.</p> <p>(FOR INFORMATION PURPOSES) QUESTIONNAIRE CONTAINS ITEMS SUCH AS:</p> <p>I NEED (MORE), (LESS), (ABOUT RIGHT).- TO LET OTHERS KNOW WHEN I DON'T UNDERSTAND.</p> <p>- TO ENCOURAGE FEEDBACK FROM OTHERS.</p> <p>PARTICIPANTS ARE THEN ASKED TO CHECK THREE ITEMS THAT ARE MOST IMPORTANT FOR THEM TO WORK ON.</p> <p>QUESTIONNAIRE WILL BE FINALIZED ANON.</p>

Feedback: . knowledge of results

Lets student know if doing right or wrong

If right, what's right about it

If wrong, what's wrong

What to do to improve performance

Should include opportunity to practice

Give example(s) based on your experience that includes five points above.

Put on videotape.

VIDEOTAPE: Brief triggertapes, e.g.,

Student: "Hi, Mr. Johnson. It's time to begin your therapy." Patient rolls eyes. Supervisor looks out window.

Supervisor abruptly takes over task from fumbling student.

Another.

Elicit response to videotapes from audience (include following points):

Identify feedback that was given and how it was given (verbal and/or non-verbal)

Suggest how student might have felt

What message would supervisor want to convey in situation?

How might it best be done? Alternate means?

(Option 1)

VIDEOTAPE (approx. 10 minutes)

Instruction (on tape): People are better able to respond to feedback that is based on their specific performance and that is given in the form of objective description.

Simulation: supervisor giving student subjective feedback
supervisor giving student objective feedback

QUESTIONS/REMARKS

SUGGESTIONS FOR TRIGGER-TAPES.

THREE DIFFERENT OPTIONS FOLLOW. WHICH DO YOU PREFER?

(Note: WHAT I'M CALLING INSTRUCTION HERE WILL CONSIST OF NARRATION AND/OR TITLES ON THE VIDEOTAPE.)

<p><u>Instruction:</u> Feedback is given to enable the learner to gain knowledge, skill or attitude, and to maintain mastery. Feedback can be intrinsic (internal) or extrinsic (external). Example.</p> <p><u>Simulation:</u> Pot boiling over. Therapist doing something successfully (and realizing it).</p> <p><u>Instruction:</u> Extrinsic feedback does not originate in the task, but comes from an external source.</p> <p><u>Simulation:</u> Audience applauding; student being praised by supervisor.</p> <p><u>Instruction:</u> Learners require more extrinsic feedback than do people who have gained mastery. Students who learn to recognize and use intrinsic feedback will maintain mastery. The supervisor can promote mastery by withdrawing extrinsic feedback in an organized manner, and by helping the student to recognize and seek intrinsic feedback. This recognition is a watershed in the growth process. The recognition and use of intrinsic feedback is an on-going process and it relates to professional satisfaction. Examples.</p> <p><u>Simulation:</u> dramatization of the last point.</p>	<p>QUESTIONS/REMARKS</p>
<p>(Option 2)</p> <p>VIDEOTAPE</p> <p>Dramatization comprised of the four simulations above. No "instruction."</p> <p><i>Encourage audience to identify important elements of feedback.</i></p>	<p>ANY SUGGESTIONS?</p> <p>"IMPORTANT ELEMENTS" WILL BE IDENTIFIED FOR THE LEADER. THEY WILL BE THOSE CONTAINED UNDER "INSTRUCTION" IN OPTION 1.</p>

(Option 3)

VIDEOTAPE

Student interviewing patient to assess skill at meal preparation. There will be some positive and some negative components in the student's performance.

You can break the audience into small groups or use them as one large group.

Audience will determine what the most effective feedback on the student's performance would be and how it could best be given.

Identify steps taken to arrive at conclusion.

One person in group will role play giving the feedback that the audience designed. (If you use one large group, you may have to enact this role.)

Another person will role play the student.

Both will share how they felt about giving and receiving the feedback.

Negative Feedback

Examples from the literature indicating how people find negative feedback difficult to give.

Example from your own experience.

Have audience think about and suggest how they can best accept negative feedback about themselves.

Collect answers on chalkboard.

Give audience a situation, e.g., "Your student has put several patients at risk. You are considering termination." or "Student does well academically; knows theory; however, after six weeks is still unable to apply it in the clinic."

QUESTIONS/REMARKS

THIS OPTION DOES NOT
FOCUS ON INTRINSIC-
EXTRINSIC.

TO BE DEVELOPED.

DO I WANT SOME
SUGGESTIONS HERE?

OTHERS?

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