



Committee for the Evaluation of Occupational Therapy Study Programs

General Report

September 2012

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Chapter 1: General Background

During its meeting on November 11, 2011, the Council for Higher Education (CHE) decided to evaluate departments in the fields of Occupational Therapy.

Following the decision of the CHE, the Minister of Education who serves ex officio as a Chairperson of the CHE, appointed a committee consisting of:

- Prof. Winnie Dunn, University of Kansas Medical Center, USA– Committee Chair
- Prof. Tal Jarus, The University of British Columbia, Canada
- Prof. Annette Majnemer, McGill University, Canada
- Prof. Kenneth J. Ottenbacher, University of Texas Medical Branch, USA

Ms. Daniella Sandler - Coordinator of the Committee on behalf of the CHE.

Within the framework of its activity, the Committee was requested to:

- Examine the self-evaluation reports submitted by institutions that provide study programs in Occupational Therapy
- Present the CHE with final reports with findings and recommendations for each of the evaluated academic units and study programs.
- Submit to the CHE a general report regarding the status of the examined field within the Israeli system of higher education and relevant recommendations.

The Committee's letter of appointment is attached as **Appendix 1**.

The first stage of the quality assessment process consisted of self-evaluation, including the preparation of a self-evaluation report by the institutions under review. This process was conducted in accordance with the CHE's guidelines as specified in the document entitled "The Self-Evaluation Process: Recommendations and Guidelines" (October 2010).

Chapter 2: Committee Procedures

The Israeli CHE gave an overview of higher education in Israel and a description of the Israeli CHE at their first meeting on June 12, 2012. They also discussed Occupational Therapy Studies Programs in Israel and fundamental issues concerning the committee's quality assessment activity. Committee members had received copies of the departmental reports before this date.

During June 2012 committee members conducted two-day site visits to Tel Aviv, Haifa and Hebrew University.

This report refers to the General State of all Occupational Therapy Programs in Israel.

Chapter 3: Evaluation of Occupational Therapy Studies Program in Israel

1. Program:

The occupational therapy programs in Israel are strong and valued members of the academic communities within which they work. The faculty members and clinical preceptors are very committed to occupational therapy education, and dedicate their professional efforts to supporting strong evidence based practice, teaching and research.

There are several themes that arose during our visits that are common to all three programs, many of which are out of the departments' control, and must be dealt with across universities, and with the governmental bodies responsible for these areas of consideration.

There were consistent themes across the three university programs that highlight the strengths of Occupational Therapy in Israel.

- The students were of extremely high quality; the brightest students apply to the occupational therapy programs, and a very small portion of applicants are accepted (5-50%) because of the limited space and resources available within the three university programs. All graduates are employed, and there are openings that go unfilled each year, suggesting the demand remains high.
- The clinical community has made a strong commitment to the universities to support student supervision, teaching and research.
- We were very impressed with the cultural sensitivity displayed by all the occupational therapy departments. The faculty members are strongly committed to meeting the needs of the Israeli community at large, including the Arab community, Orthodox Jews and immigrants.

Recommendations:

- 1.1 This is the first review of occupational therapy programs by the Council for Higher Education, and so the process introduces many new possibilities for supporting high quality occupational therapy education and research in Israel. For example, occupational therapy programs need to conduct routine surveys of their graduates, employers and clinical supervisors to keep apprised of the status of their graduates and to respond to formative feedback that can inform the curriculum.
- 1.2 There is a shortage of occupational therapists in Israel in general, and some areas of practice are experiencing a more chronic shortage than others. For example, mental health and aging programs have a harder time recruiting personnel. Some occupational therapists are paid more than others, and this creates recruiting difficulties for certain agencies. The governmental ministries of education, health and welfare need to collaborate with occupational therapy faculty and clinicians to examine the inequity of

pay in occupational therapy positions across settings to build capacity across service areas.

- 1.3 All the universities that sponsor occupational therapy programs employ a hierarchical decision making structure for hiring new faculty. While we agree that the leadership of the university needs to participate in the decision making process and approve the selection of candidates, we believe that these departments/schools of occupational therapy have developed to the point that they have the substantive experience to have more authority and responsibility to lead hiring decisions. In some cases, they may hire faculty with primary teaching responsibilities. In other cases, they may create an innovative proposal for supporting promising young researchers to complete their training [e.g., supporting them during a post-doctoral experience] with a commitment to return to the sponsoring university. It is not in the best interests of these growing departments/schools of occupational therapy to have imposed or rigid rules that have evolved from more established disciplines.
- 1.4 We agree that the same standards of credentials and productivity need to be applied; additionally, we believe that the leadership in occupational therapy programs must have responsibility and accountability for making hiring decisions that meet the high standards in a way that is consistent with the occupational therapy discipline and mission of the department/school.
- 1.5 The universities are requiring potential faculty applicants to leave Israel for doctoral and/or post-doctoral study, so although they are getting an extraordinary education here, and are quite adaptable as evidenced by their successes (e.g., publishing their work internationally), they are not considered 'eligible' for positions in the country. There are concerns about "inbreeding" (i.e., all degrees earned within one university). The concern about 'inbreeding' must not apply to the entire country of Israel; there are distinct graduate experiences across universities and disciplines with distinguished researchers within Israel that would provide diverse, unique and valuable training experiences for potential occupational therapy faculty.
- 1.6 We recommend that for future Quality Assurance Evaluations of Occupational Therapy that the programs be required to include curricular philosophy, conceptual framework and design to provide an overarching view of their education programs.
- 1.7 The occupational therapy doctoral programs have a lot to offer developing researchers. We recommend that they market and accept qualified applicants from other disciplines to enrich their academic research programs.
- 1.8 Occupational therapists are very capable in Israel, and many already come back to graduate school. We invite the profession to consider when in their collective development they would be ready to move to the Master's degree being their entry degree to the profession.
- 1.9 These programs have extremely loyal alumni, and yet there does not seem to be formal connections with alumni and the university programs. We recommend that the occupational therapy programs establish connections with alumni, and include information sharing and requests for donations to support departmental/school initiatives.

2. Research

The University programs are very productive in research. Their work is internationally recognized and they mentor large numbers of graduate students in their research programs.

Recommendations:

- 2.1 It is very clear that the HELSINKI law needs to be revised to reflect current methods for conducting clinical research involving human subjects. There is a lot of research that does not directly involve medical personnel, making it awkward for physicians to serve as the leader of the studies they know little about, yet must take responsibility for the conduct of the research. Further, senior faculty researchers do not get credit for leading projects, when there is a requirement for a physician to serve as the lead, when physicians are not knowledgeable about the topic. This change will likely also require that the universities take on new responsibilities for Ethics reviews. We recommend that the government and the university leadership across the country begin a process of revising these rules that are hampering and distorting the excellent quality research being conducted by occupational therapists and other health professionals throughout Israel.
- 2.2 With few exceptions, doctoral and postdoctoral trainees in occupational therapy have very limited access to funds to support their graduate training. As a result, they must continue to work full time in practice while taking courses, obtaining mentoring, completing research and writing. As a result, students are hampered in productivity, time to completion and opportunities for collaboration. The government and the universities need to support doctoral students and post-doctoral fellows so they can concentrate on their research program of study. This strategy has the additional benefit of supporting academic faculty's research programs, and enables them to apply for more grants and publish more of their work.
- 2.3 Criteria for promotion and tenure need to reflect standards appropriate for the field, such as publishing in influential journals in occupational therapy and related disciplines. It is important to create benchmarks appropriate for the field of study; impact factors based on biomedical science are not appropriate for applied research publications. Each University Promotion and Tenure Committee needs to create relevant benchmarks for occupational therapy faculty members.

3. Teaching/ Learning:

Universally, students reported feeling 'privileged' to study with their occupational therapy faculty members. Faculty members are clearly dedicated to their teaching missions, listen to student feedback, continuously update their material and engage in continuous quality improvement of their teaching.

Recommendations:

- 3.1 The occupational therapy faculty members in all three programs have extremely heavy teaching loads for research faculty when compared to universities in North America. We recommend that the appropriate governmental and university leadership set more acceptable standards for teaching loads, and that these standards include a mechanism for reducing teaching loads when research faculty have funding for projects that require the senior faculty's time to oversee and conduct the project. Because this is a professional program that requires a large number of content specific courses to meet occupational therapy minimum standards, courses cannot be removed for a period of time while faculty members work on a project. Furthermore, courses must have more multiple small groups, practical labs and competency checking when compared to other courses in the university, which also increases the time demands for teaching and evaluating students. We acknowledge that each University may need to set a specific plan that is consistent with their structure.
- 3.2 In order to alleviate the burden of creating many elective courses at each university program, we recommend that the 3 programs consider the possibility of offering graduate coursework across all the universities using internet, web conferencing, or other distance means so students would not have to travel to each university. This would enable graduate students to get the best expert teaching a course, and would reduce overall teaching loads for graduate courses. Within this possibility, students would still sign up for their graduate work at their preferred university, with their preferred mentors, and courses would be co-listed across universities. Universities could also offer these courses for non-degree seeking clinicians as a source of revenue and to support better practice.
- 3.3 The three occupational therapy programs need to clearly differentiate the MS clinical/ [non-thesis] and MS thesis /PhD tracks. Currently the vast majority of graduate students take the thesis option because this keeps their options open to pursue a PhD later if they wish. Therefore, many students complete a thesis, which creates a much greater burden on supervising faculty, and only some of these students continue to the PhD. It is at the PhD level that faculty receive the most help to advance their research agenda so we recommend that the schools create a clear differentiation of the two master's degree options so that students who seek advanced clinical training and greater proficiency as a knowledge user to promote evidence based practice would pursue the non-thesis track, whereas those who intend to continue to the PhD would pursue the thesis track. Those pursuing the thesis option would obtain more credits for the thesis, and less credits for coursework, creating additional clarity about the difference between the 2 options.
- 3.4 We recommend that the occupational therapy programs consider what it means that all students earn grades in a very narrow and high range. This practice does not

differentiate performance among students, and perhaps reduces the possibilities for substantive feedback.

- 3.5 The occupational therapy faculty members are making strides to be connected with members of other disciplines, but location, resources and other factors are creating barriers to inter-professional education. There is a critical need for the government and the universities to prioritize inter-professional education and research by creating and supporting initiatives to house health disciplines in proximity to each other, and to fund inter-professional education, doctoral students and research projects that address inter-professional collaboration, the impact on learning and ultimately on health outcomes.
- 3.6 All departments indicated that they are having increasingly greater difficulty finding clinical placements for students. We recommend that the fieldwork leaders employ innovative and experimental strategies for providing supervision. For example, some settings are supervising 2 students with one therapist. The clinical preceptors are trying out methods that can be shared.
- 3.7 The Council for Higher Education needs to address the inequity of payment to clinical sites for supervising students. Currently, the developing programs in private colleges are paying as much as 4 times more for placement supervision, and so the public universities cannot compete. We recommend that the CHE require a set amount be paid for clinical site supervision as part of the accreditation process. Specifically, the universities have a limit on this remuneration; colleges need to be required to pay the same amount to equalize the process within the community.

Signed by:



Prof. Winnie Dunn



Prof. Tal Jarus



Prof. Annette Majnemer



Prof. Kenneth J. Ottenbacher

Appendix 1: Letter of Appointment



שר החינוך
Minister of Education
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November, 2011

Prof. Winnie Dunn
Department of Occupational Therapy Education
University of Kansas Medical Center
USA

Dear Professor Dunn,

The State of Israel undertook an ambitious project when the Israeli Council for Higher Education (CHE) established a quality assessment and assurance system for Israeli higher education. Its stated goals are: to enhance and ensure the quality of academic studies; to provide the public with information regarding the quality of study programs in institutions of higher education throughout Israel; and to ensure the continued integration of the Israeli system of higher education in the international academic arena. Involvement of world-renowned academicians in this process is essential.

This most important initiative reaches out to scientists in the international arena in a national effort to meet the critical challenges that confront the Israeli higher educational system today. The formulation of international evaluation committees represents an opportunity to express our common sense of concern and to assess the current and future status of education in the 21st century and beyond. It also establishes a structure for an ongoing consultative process among scientists around the globe on common academic dilemmas and prospects.

I therefore deeply appreciate your willingness to join us in this crucial endeavor.

It is with great pleasure that I hereby appoint you to serve as the chair of the Council for Higher Education's Committee for the Evaluation of Occupational Therapy Studies.

The composition of the Committee will be as follows: Prof. Winnie Dunn (Chair), Prof. Tal Jarus, Prof. Annette Majnemer and Prof. Kenneth J. Ottenbacher.

Ms. Alisa Elon will coordinate the Committee's activities.

In your capacity as the chair of the Evaluation Committee, you will be requested to function in accordance with the enclosed appendix.

I wish you much success in your role as chair of this most important committee.

Sincerely,


Gideon Saar
Minister of Education,
Chairperson, The Council for Higher Education

Enclosures: Appendix to the Appointment Letter of Evaluation Committees

cc: Ms. Michal Neumann, The Quality Assessment Division
Ms. Alisa Elon, Committee Coordinator

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