Occupational Therapy Model Curriculum

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December, 2008

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### Occupational Therapy Model Curriculum Guide

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Introduction: Constructing the Curriculum

What is a curriculum? The answers to that question matter because they guide how we design and implement an educational program. In this Guide we present a process for curriculum design in very broad strokes. Curriculum design is a complex process; at times, it requires us to consider many elements concurrently, while at other times it requires us to develop elements in sequence based on decisions or commitments we have made earlier in the process. The purpose of this Guide is, therefore, to provide an overarching view of curriculum design that can be adapted to the vision that faculty may have for their particular institution. Although the idiosyncratic features of a curriculum will vary from institution to institution, we present some core elements that should be present in some form in all curricula.

Before designing a curriculum, it is important to review different ways of conceptualizing curricula in order to assure choices are made intentionally, with an understanding of their implications. In this section we present two approaches or “meta-models” for defining and implementing curricula, and review three types of curricula that exist within most educational programs. The first meta-model is probably the one with which educators are most familiar. It is described as a “rational model of curriculum” (Tierney, 1996). It has also been described as a “modern model” (Hunkins & Hammill, 1996) and a “paradigmatic model” (Olson, 2000). We will refer to this model as the “traditional model.” The second meta-model may not be as common in our curricular vocabulary. It is described as a “narrative model” (Olson, 2000). Similar models have been described as “postmodern” (Doll, 1996; Hunkins & Hammill, 1996), “critical” (Tierney, 1996), and “nonfoundational” (Bruffee, 1996). We selected these models primarily because they appear in the leading compendia on curriculum published by the American Society of Higher Education and the Association of American Colleges and
Universities. Some authors of these models are educational scholars in undergraduate contexts, and thus address their comments to the undergraduate curriculum. However, because the curricular principles these authors address are broad and general, they are also applicable to thinking about the graduate curriculum. Some authors write specifically about professional education, whereas others write more generally about learning in higher education. We also supplemented these readings with a brief literature search and prominent textbooks on teaching and learning.

After discussion of these models, we present a schematic of the elements that should be considered in a curriculum and be intentionally organized according to the model that best fits the institution and is best suited to achieve the intended purposes of the curriculum. A scheme of such elements is presented that represents the organization of the present guide. Each element, in turn, is explained in more detail in the subsequent sections of this guide.

The Traditional Meta-Model

In a traditional view, a curriculum is conceptualized as a carefully selected and sequenced “constellation of courses” (Stark & Lattuca, 1997). Curricula within this model are often designed by determining what content must be taught and then organizing content into courses and/or course sequences. Faculty create overarching learning objectives for the curriculum and for each individual course. At some point in the process, faculty make sure that all content areas required by educational accreditors (such as the Accreditation Council for Occupational Therapy Education [ACOTE®] in the case of occupational therapy curricula) are inserted into the courses, and then design activities that will help students meet the course and curriculum objectives. Finally, students’ mastery of the content and achievement of the objectives is assessed.
The traditional model for curricula follows in the traditions of Bobbitt (1918), Tyler (1949), and Taba (1962), who are credited for bringing scientism, or a technical–rational, positivist approach to learning design (cited in Hunkins & Hammill, 1996). Tyler recommended that curricula be developed by first asking four questions:

- What are the educational purposes to be attained?
- What educational experiences are likely to achieve these purposes?
- What organization of educational experiences would be most effective and efficient?
- How will we determine if the purposes are being achieved?

Taba (1962) developed a 7-step model for curriculum design:

1. Diagnose needs
2. Formulate objectives
3. Select content
4. Organize content
5. Select learning experiences
6. Organize learning experiences
7. Evaluate

These models are very useful to educators who face the daunting task of developing and re-developing curricula and courses that meet the changing, present, and future needs of the profession. However, the traditional meta-model of the curriculum, as a whole and as expressed in a single course or class session within the curriculum, presupposes that knowledge exists independently from the educator, the students, and the interactions between them (Olson, 2000). Such a view assumes that knowledge is something that can be packaged and then delivered to
students. In other words, after establishing the series of courses that a program will refer to as "the curriculum," the educator’s role is to deliver to students the agreed-on course content that he or she has been assigned. Under this model the curriculum takes on an appearance of neutrality about the particular knowledge, skills, attitudes, and professional discourses that are selected and emphasized (Bruffee, 1996; Tierney, 1996). The curriculum is viewed as simply transferring objective knowledge. The process of curriculum design and implementation does not, in other words, involve a critical evaluation of the historical and social processes that formed the premises on which the selected knowledge, skills, and discourses are based in the first place. Nor does it ask questions about the “particular way of understanding the world and the concomitant vision of one’s place in the world and in the future” (Simon, 1987, p. 376) that is promulgated by the curriculum.

For example, an occupational therapy curriculum may be organized according to the major diagnostic areas that occupational therapists address in practice. Thus, course sequences may be structured according to physical and mental dysfunctions and the treatments strategies most effective in reducing the consequences of such dysfunctions for service recipients of various ages. On the surface, such a curriculum may appear neutral because it provides students with scientific knowledge. However, such a curriculum may overlook the reductionistic ideology that governed the research that produced such knowledge (Petersen, Bleakley, Brömer, & Marshall, 2008) and thus reinforce a perspective that disability is a matter of the individual’s biology, ignoring the degree to which social stigma creates boundaries for successful living (Shakespeare, 2008).

The traditional model of curriculum is often aligned with a transmission perspective of teaching and learning. It also sometimes is aligned with an apprentice perspective (Pratt, 1998).
The *transmission perspective* emphasizes a relatively stable body of knowledge and skills that students must acquire and reproduce. Content is the driver of the learning process, and the teacher’s role is to represent the content with expertise and clarity. Teachers determine what should be learned and how it will be assessed. The *apprentice perspective* emphasizes the acquisition of knowledge and skills in real practice contexts. Both the content and teacher are fused. The teacher attempts to make his or her thinking transparent; guides students’ participation in learning tasks; and coaches students in challenging, problem-solving situations. Learning is assessed through the performance of tasks the teacher deems important. When coaching is based on a “think and do as I think and do” model, the perspective most closely resembles a traditional model of curriculum.

A traditional model can be very useful, and may for some academic programs be the model of choice for fulfilling a serious contract with society to produce knowledgeable and skilled occupational therapists. However, it is important to acknowledge that the traditional view is rooted in the very positivist assumptions that occupational therapists have worked so hard to move away from in education. Scholarship in occupational therapy education has for some time now emphasized the importance of a teaching practice that is informed by a view of knowledge as always under construction by teachers, students, scholars, and others, and that this construction should take place in learning contexts that are situated in the cognitive, affective, and physical performances of expert practice as much as possible (Whiteford & Wilcock, 2001; Wood et al., 2000). One benefit of the traditional model is its structured planning process. One major challenge of the model is the need to adapt its structured planning process for use with assumptions about knowledge that vary from those of its origins.

**The Narrative Meta-Model**
A narrative model of the curriculum is based on the belief that knowledge, including knowledge about which courses to offer, what content to teach, and what sequence to teach it, is crafted through experiences that take place through interaction with specific social and physical environments (Dewey, 1938). In a narrative view, a curriculum is conceptualized as an evolving story. The emphasis is on “process and performance over a static, finished work” (Hunkins & Hammill, 1996, p. 22). A major plot of this process and performance involves the promulgation of a constructed (shared and evolving) understanding of what the faculty believe counts as knowledge and is, therefore, important to learn. This plot also involves a particular discourse about the profession and its role in health care and society (Tierney, 1996). In this view, a curriculum is, in part, designed by asking, “What story line do we want students to live out while in this program? What discourse do we want students to engage in and be well-versed in?” (Olson, 2000).

In a narrative model, the curriculum is considered tentative, recognizing that the story line that gets lived out varies with each new student group, each change in faculty, and each course revision. Content is fluid and evolves during each course and within each class session based on what happened in the previous session, what the students are experiencing, and who is teaching. Competence is also fluid; that is, competency is not seen as enduring but as shifting in response to new physical and social contexts or under new circumstances (Curry & Wergin, 1996).

Contrasting Tyler’s more traditional and rationalistic curriculum design process, Doll (1996) proposed a process that uses “the Four R’s” (p. 63) as criteria for what constitutes a quality narrative or postmodern curriculum:
• **Richness:** The curriculum needs to be rich enough in ambiguity, challenge, breadth, and depth to invite dialogue and meaning making.

• **Recursion:** The curriculum needs to continuously loop back and frequently revisit ideas that were explored earlier, looking at them afresh in light of new ideas as they are being introduced. This recursive criterion also applies to curriculum design; that is, the designers should continuously turn around and look again at the curriculum from new and critical perspectives.

• **Relations:** The curriculum needs to create opportunities for students to make connections across and between content and to practice

• **Rigor:** The curriculum needs to uphold the expectation that students work through questions, problems, and tensions in order to create coherence for themselves.

The narrative curriculum model often is aligned with developmental, social reform and nurturing perspectives of teaching and learning (Pratt, 1998). The *developmental perspective* emphasizes the growth in increasingly complex thinking about practice and the profession as a whole. Content is a means to practice critical thinking, such as exploring assumptions undergirding practice and different practice settings, or integrating multiple ideas to construct new meanings. The teacher formulates learning activities that will bridge students’ current ways of knowing with those the instructor hopes students will develop in the course of the academic program. Assessment involves identification of how well students are critiquing, integrating, and contextualizing content.

The *social reform perspective* emphasizes an explicit ideal to which learners are encouraged to subscribe. The content of courses is critiqued and continuously reconstructed from the perspective of the dominant ideology of the field. The teacher serves as an advocate and
promoter of the adopted ideology and models the process of integrating an ideal with action. For instance, the teacher may wish to emphasize the role of occupational therapists in influencing social policy in order to build a society that more fully encourages participation of people with disabilities. A course on physical disabilities in this instance not only would include an understanding of the biological substrates of disability, but also would encourage an analysis of how people with such disabilities participate in society and the policies that support or limit such participation. Thus, the understanding of physical disabilities is connected with potential actions students may take to influence particular policymakers, and so on.

The nurturing perspective emphasizes the personal development of learners’ self-concept. Primary emphasis is on the relationship between the teacher and the learners as they mutually engage with making meaning of the content. The instructor considers the learners’ whole-life situation, and provides support, safety, and encouragement in the learning process.

In sum, the true curriculum in a narrative model is ultimately what “gets made” of the courses and content through the interactions of a teacher and a group of students, in a particular place and at a particular time, each with their own perceptions of what they are doing there, and each with their own future intentions (Olson, 2000). The curriculum is that which comes to life around the content, not the content itself. “Curriculum comes to life within classrooms as teachers and students create lived curriculum texts. Curriculum then is what they experience situationally and relationally, each person constructing and reconstructing his or her narrative knowledge in response to interactions” (Olson, 2000, p. 171).

The educator’s role is to orchestrate or stage the characters (including faculty, students, clinicians, and authors of texts used in a class), the fusion of plots (including the plot line of the course, the class session, and the plot line of intentions of students and instructor), and the
settings or backdrops (including the academic setting, the practice setting, and the setting of each character’s life) (Olson, 2000). The educator choreographs these elements to create a particular story. Change of one of the characters (students or faculty member or authors being read), plot lines, or settings causes the story to change and produces a different curriculum because the lived story is being modified.

One benefit of the narrative model is its dynamic, heterarchical spirit. One challenge from a fluid narrative perspective is to create a structured and coherent educational program with a full cadre of objectives, courses, and learning activities and still maintain the organic, evaluative, critical features characteristic of a narrative model.

**Three Curricula in One**

Regardless of which of the two meta-models, or combination thereof, that faculty draw on to design a curriculum, the result is actually three curricula: the explicit curriculum, the implicit curriculum, and the null curriculum (Sullivan, 2005). The explicit curriculum, or what Bloom (Anderson et al, 2000) termed the *manifest or formal curriculum*, is made up of the actual courses, sequences, teaching methods, and field experiences afforded a group of students. Through the explicit curriculum, students are apprenticed in the cognitive practices or ways of knowing that are characteristic of the profession. The implicit curriculum, or what Bloom referred to as the *latent curriculum*, is made up of the rituals, rites, patterns of relating, artifacts, spaces, and social organization—the culture—of the program. Through the implicit curriculum, students are apprenticed in the kind of person they are to become as an occupational therapist. Students are socialized through the implicit curriculum in the values of professionalism and being a member of a professional community. The null, or “absent,” curriculum involves all the content, courses, course sequences, teaching methods, and field experiences that students will not
learn or experience by virtue of having enrolled a particular academic program with a particular curriculum. The null curriculum refers to the universe of knowledge that is not being considered because of decisions made by faculty. Because such knowledge is not being considered, it can inadvertently be construed as unimportant or as less important than the knowledge that is considered in a curriculum.

**Implications for Occupational Therapy Curricula**

Most programs in occupational therapy reflect a unique combination of each of these meta-models and their associated perspectives on teaching and learning. Within these overall approaches to curricula, educators also select other related approaches to further guide curriculum design. Some commonly used approaches in occupational therapy include:

1. **Student-centered learning**: The curriculum takes seriously the previous life experiences of students and their developmental needs, and seeks to engage them in various degrees in designing and self-directing learning experiences (e.g., Cohn, Dooley, & Simmons, 2001; Hammel et al., 1999; Hobbs & Luebben, 2001).

2. **Future-based curriculum design**: The curriculum is primarily concerned with what students and the profession will need in the future and emphasizes strategic thinking, trend analysis, and so on (e.g., Royeen, 2001; Wood et al., 2000).

3. **Competency-based education**: Students acquire and demonstrate proficiency in core skills considered essential for competent practice (e.g., Barris, 1978; Cornish-Painter, Peterson, & Hazel, 1997; Hinojosa, 1985; Hinojosa, Moore, Sabari, & Doctor, 1994a, 1994b; Odawara, 2005).

4. **Subject-centered education**: Content is designed to explicitly link to the core subject of human occupation; link learners to each other, scholars, and clients; and link occupation to
learners’ personal lives (e.g., Breines, 1987; Hooper, 2006; Pierce, 1999; Whiteford & Wilcock, 2001; Yerxa, 1998).

These approaches do not, in and of themselves, serve one or the other set of meta-curricular assumptions. Any of these can be directed in ways that serve the assumptions of the traditional or the narrative model. Therefore, making the models and teaching perspectives increasingly explicit can help refine the curriculum design process. This can happen namely by helping faculty avoid construction of curricula in which underlying perspectives on curriculum and teaching collide and conflict. Further, faculty need help to align the curriculum design with their group’s deep beliefs about learning as it relates to the context of this moment in the field’s history and in light of the American Occupational Therapy Association’s (AOTA’s) Centennial Vision for its future (AOTA, 2006). For, as Pratt (1998) stated,

*The measure of centrality of a belief is not necessarily a matter of logic or rationality but, more often, the extent to which the belief itself is not in question. When a belief is held without question it acts as arbiter in determining whether intentions, actions, or even other beliefs are reasonable and acceptable.* (p. 21)

**Elements of a Curriculum**

The term *curriculum* means different things to different people, and curricula take many forms. Meta-curricular assumptions are the real origin of a curriculum (Pinar, Reynolds, Slattery, & Taubman, 2005). Therefore, meta-curricular understanding is essential to the process of curriculum design. The meta-curriculum, whether explicitly examined or not, directs the way in which the essential components of the curriculum are organized and the degree to which such elements complement each other. Although elements of a curriculum may vary depending on the
meta-curricular model, there are common components to all meta-models that should be sorted through in order for a curriculum to be successful in its particular context (Posner, 2003). We have made the effort to present the elements of a curriculum in a nondoctrinaire manner, believing that multiple perspectives should be understood and integrated in any curriculum in order to make it relevant within its institutional, geographical, and professional contexts. That multiple perspectives exist should not discourage faculty in the process of curriculum design. Ignoring multiple perspectives puts us at risk of seat-of-the-pants decision-making or of developing tunnel vision. Borrowing uncannily from all perspectives can lead to a “garbage can” eclectic curriculum into which potentially conflicting or invalid assumptions and practices are collected. Instead, what is needed is a reflective eclecticism, in which the tacit assumptions of each curricular decision are unpacked in order to evaluate and select the most appropriate alternative (Glatthorn, Boschee, & Whitehead, 2006).

Figure 1 represents the dynamic interrelation of the multiple elements that must be considered in a carefully crafted curriculum. This figure depicts desired abilities-based outcomes as central to a curriculum. However, a number of deliberations must be made before such outcomes are determined, including considering how a particular academic program and/or unit fits into the mission of the host institution and how it contributes to that mission within the context of the institution. Further, considerations of professional values and expectations help shape the outcomes that will be sought, thus assuring that the curriculum develops competent members of a profession. Finally, the needs of society, both within the immediate and extended geography, must be considered and choices made about which particular needs will be given priority within a curriculum. Figure 1 also depicts considerations to be made after the desired abilities-based outcomes of a curriculum are determined. The pedagogical philosophies should
be selected that best fit the desired outcomes. In addition, the content of knowledge, skills, and attitudes that correspond to the outcomes must be selected, and some form of sequence or progression of learning must be put in place. Throughout the process of making these deliberations, there must be a continuous evaluation of the compatibility of all these elements, labeled as formative assessment in Figure 1. In this way, each subsequent decision is made in light of previous decisions.

![Diagram](image_url)

**Figure 1: Broad Considerations of Curriculum Design**

Figure 2 represents a more detailed depiction of elements that must be considered in curricular design. We have represented curriculum elements in the linear fashion in which they are described in the following sections of this Guide. We must emphasize, however, that the continuous formative assessment loop described in Figure 1 is also an essential element of Figure 2, in which is it included as the backdrop of all curricular activities. In other words, an
assessment of need and feasibility should precede every step in which the foreground elements are considered and integrated into a curriculum. Likewise, continuous assessment should accompany and follow the implementation of any new element.

Figure 2: Design and Development of a Curriculum.
References


**Further Readings**


I. Context of the Institution

A. General Description of the Importance of the Section

Curriculum design and renovation begin with a clear understanding of the institution in which the academic program is housed. Each institution has its own mission that responds to local and regional contexts. In an important sense, the mission of the institution determines the overall outcomes or goals to which a program may aspire. Further, your curriculum should be an important contributor to the institution’s mission. Therefore, familiarity with the particular mission and unique practices of the institution is essential to assure a good match between the occupational therapy curriculum and the philosophy—and available resources—of the institution. Ultimately, understanding the context of the institution helps situate your curriculum within your institution. The purpose of this section is to help you identify important factors about your institution on which to build your curriculum.

The main curriculum design tasks related to understanding the context of the institution include:

- Analysis of the strengths, weaknesses, opportunities, and threats (SWOT) within the institution, greater community, and societal contexts (local, regional, national, and international).

- Determination of aspects of the institutional context that will influence decisions made in the design and/or revision of the curriculum.

- Evaluation of the context of the institution and determination of how your occupational therapy program dovetails with this from the perspective of your research, teaching, and clinical ideologies.
• Analysis of possible future trends of your institution, blended with the evolving theories and models in our field, noted in the “Profession’s Vision, Philosophy, and Trends” section (Chapter II) of this guide.

Mission, Ideology, Environment

Below are some examples to help you understand the process for determining the impact of institutional contextual trends on your curriculum. For each example, we have provided some questions to consider as you address your curriculum. There are likely questions in each example that would be appropriate for you to consider. However, the overarching key question to keep in mind is, “How will your curriculum assist your institution in its mission to advance community health and wellness through student education?”

Example #1: Imagine that your academic institution is in the beginning phases of planning an initiative to address major health disparities, starting a school of public health, or putting together a strategic plan for the next decade. These can all be exciting possibilities for your occupational therapy program, faculty, students, and alumni. Key questions to ask include:

1) How does your curriculum support the institution-wide effort?

2) How can you engage students with these policy-level initiatives? Do you have a course on Policy? Is there Public Health content in your curriculum? How do students learn to become advocates? What issues with health care policy implications do your students study?

3) How are complex community issues at the organization or population level presented in your curriculum?

4) What course content and assignments, and which of your program’s community outreach initiatives, focus on health disparities?
5) Which faculty research initiatives focus on health and well-being? Which students can participate in such initiatives?

**Example #2:** Imagine that your faculty is developing a new community initiative and is drawing on social work, engineering, psychology, geriatric medicine, architecture, and psychiatry faculty to look at the needs of elderly persons aging in place in the inner city. Some key questions to consider include:

1) How does your curriculum already support this community initiative by educating students on the factors that affect this population?

2) Where in your curriculum do students learn about productive aging and aging in place?

3) Of the community agencies who service the elderly, which do you collaborate with for guest lectures, research, and fieldwork?

4) What opportunities exist for occupational therapy students to work with students from any of the above-mentioned disciplines?

5) Are there currently shared courses with other departments, or interdisciplinary assignments? Is this something the faculty can explore?

**Example #3:** Imagine that several congressional representatives are encouraging your university to expand its role in a nearby inner-city neighborhood. The Dean is aware that the occupational therapy program has been successful in community outreach through clinical services and research efforts, and has asked the occupational therapy faculty to lead an interdisciplinary effort to understand the needs of the intergenerational community. Some key questions to consider include:

1) Which organizations are in this community? Are they fieldwork sites? Are they research partners?
2) How can you engage students in community outreach and in conducting needs assessments to begin to understand community strengths and needs?

3) How would you design intergenerational programs or space that could guide a student project?

4) How much cultural/diversity training is in your curriculum? Should this be supplemented? Through which learning experiences can students synthesize the information and create occupational therapy service programs?

5) Through which course assignments are students encouraged to enter and be part of the community (such as eating at ethnic restaurants, shopping at local grocery stores, attending community celebrations, or contributing to local health fairs)? What other opportunities are encouraged?

**Example #4:** Imagine that a medical school department approaches you to discuss the increase in emergency room visits at the institution’s hospital by older adults and the burden this is placing on service delivery and untrained doctors. Some key questions to consider include:

1) How does your curriculum cover continuity of care and the issues facing elderly persons who live in the community?

2) What opportunities are there for your student to offer training in the community, such as teaching computer skills to those people aging in place?

3) Can your students identify transportation issues and solutions for the elderly?

4) How are your students involved in a community organization, such as the local Alzheimer’s Association or the Agency on Aging?

5) What learning opportunities, such as observing caregiver support groups, can be identified for your students?
6) Do students on fieldwork encounter people with dementia? How are communication skills and therapeutic use of self threaded throughout the curriculum so that students are ready to interact with individuals who are cognitively challenged and their families?

7) What other evidence-based, occupation-focused learning opportunities can faculty doing hospital-based research identify for students (such as collaborating with emergency room personnel to experience acute care triage)?

**Example #5:** Imagine that the newly hired chancellor at your institution announces that all curricula must have a renewed emphasis on the university’s religious tradition, and all students will be required to take at least one course in ethics. Some key questions to consider include:

1) Where does the topic of ethics fall within your curriculum? Can you trace ethics from semester to semester, and identify topics and assignments that already relate to this renewed mandate? Can the ethics requirement be met through the existing structure in the curriculum or should a separate course be entirely devoted to this initiative?

2) What type of learning opportunity reinforces skill acquisition in this area? How does the topic of spirituality overlap with ethics in your curriculum?

3) What opportunities are there for students to debate the role of occupational therapy in ethics? Of ethics in occupational therapy?

4) What type of clinical ethical dilemmas can you use in your teaching?

Across the world there is a need for health care professionals who can offer clinical care, education, and research. In what ways are your faculty and students prepared to value and participate in similar new or ongoing challenges, as illustrated in these examples? How does your occupational therapy curriculum prepare students, using these types of initiatives, to meet
societal needs? Should they? The process of answering these questions begins early with recruitment of prospective students as well as with the occupational therapy curriculum that you value and offer. For example, if you require an ethics course as a prerequisite to admission, then you should clearly articulate how sequential semesters will build on this knowledge, how this prerequisite helps students to select your occupational therapy program, and how this prerequisite fits the desired student outcomes of your program and institution.

Now it is time for you to reflect on the institutional context of your particular university, and the impact it has on your curriculum by posing questions for yourselves, much the same as modeled above.

**Curriculum Design Begins With the Understanding of International, National, and Local Societal, Political, and Institutional Trends**

The understanding of societal trends comes from reading extensive and varied literature, attending university lecture series, joining faculty groups (such as a women’s academic network), participating in political engagement, talking with the trend setters, and even engaging well-traveled artists to highlight their exposure to occupational therapy. Attending World Federation of Occupational Therapists (WFOT) congresses and American Occupational Therapy Association (AOTA) conferences are other ways of understanding international trends, as well as reading international occupational therapy journals and simply traveling! Being aware of trends helps to prepare students to meet societal health care needs. Beginning with your curriculum design and ending in a course assignment, students must study trends; apply skills; speak to the gatekeepers; advocate for the involvement of occupational therapy practitioners; and create new opportunities for practice, fieldwork, and research.
Being aware of how your institution is addressing social trends has an impact on your own program’s strategic plan, mission statement, faculty hiring, curriculum design, research opportunities, course readings and assignments, choices of guest lecturers, student recruitment, academic prerequisites, and practice model choices. Occupational therapy must model futuristic thinking by understanding trends, predicting where the profession is heading, and valuing the skills to be flexible and to adapt to the health care climate or to new evidence that is being gathered today and will be in the public domain in 5–10 years.

Below are some contextual trends that may directly affect your institution. It is important to consider these trends in order to ensure that your program optimally fits into the university’s strategic initiatives and how this may have an impact on the curriculum:

**National/Societal Considerations**

- There have been substantial shifts in demographics and an immigration/refugee influx to the United States. Is the multicultural education that students receive sufficient to meet the needs of the shifting population?

- The war in Iraq and other parts of the world, the emerging military technologies, and the growing number of wounded soldiers and citizens are placing additional and different demands on health care providers than in previous wars. Do students have knowledge of these changes?

- Technological development, including space travel, is rapidly advancing. Health professionals, including occupational therapy practitioners, must consider implications of these technologies on the people they serve as well as on the services that can be provided, such as mapping communities for accessibility using GIS [geographic information systems]
technology. How do faculty and students view technological development and how are they prepared to embrace it?

- The traditional health-care gatekeeper, the General Practitioner or internist physician, is disappearing. How are students prepared to address this shift in the source of referrals to occupational therapy and other services?

- The price of oil and gasoline is changing community traffic patterns and trends, thus affecting outpatient and home-health service delivery systems. What strategies can be implemented to creatively address this trend?

- Telemedicine is emerging as a means for providing health care to rural populations, causing changes in how students are prepared to be health care practitioners. To what degree is telemedicine accepted and/or taught in the institution?

- The increased awareness of obesity as an epidemic has given rise to fitness and wellness initiatives in the workplace. Are there opportunities for students to contribute to these initiatives in the university?

- Shifts in generational or cohort characteristic of students suggest that they have a greater comfort level with receiving information delivered simultaneously through many sources, and with controlling the flow of that information wherever and whenever they desire. Are faculty members sensitive to this shift and prepared to make adjustments in their teaching style to meet the learning needs and preferences of students?

- There is an anticipated healthcare workforce shortage. By 2014 it is expected that there will be a deficit of 13,300 occupational therapists in the nation (Association of Academic Health Centers, 2008). What opportunity does this present to the institution? Is the institution aware
of this shortage and taking measures to expand enrollment, support the occupational therapy program, and so on?

**Regional Considerations**

- Each state’s tax support for research, for attracting new technologies and industry through public laws, for financial backing, and for development of partnerships to advance science and knowledge can have a great impact on how academic institutions can promote and serve the health needs of the state’s citizens. What are the funding priorities in the state? To what degree does the university compete for that funding?

- What is the census distribution of your region? Consider how demographics have shifted in the past decade, and how they are anticipated to shift in the next decade.

- What is the census and diagnostic distribution for admission to your local university-affiliated hospital?

**Local Considerations**

- Any occupational therapy academic program may be housed within a liberal arts or medical culture within an institution, but is also surrounded by a local neighborhood. How healthy is the neighborhood? What are the determinants of community health in your area? Who keeps track of this information?

- What are the issues and concerns of the community? Is access to care equitable? What is the role of occupational therapy in health literacy, or health and wellness community initiatives? What type of educational opportunities can your students offer to communities around these issues?
• How can the local fieldwork clinical instructors support your curriculum philosophy and participate in continuing education, adjunct teaching opportunities, or evidence-building for practice?
• How could a community advisory committee assist you with curriculum development and review?
• What opportunities are available for students to engage local politicians in the health-care debate and thus become aware of broader issues and understand the legislative process?

Working Within the Institutional Context: Broad Issues

Below are some additional questions to consider regarding the internal context or environment of the institution and the opportunities or constraints this context may place on the occupational therapy curriculum:

• How are the professional contributions and expertise of the occupational therapy faculty and students recognized in the institution? How are occupational therapy faculty represented on major faculty university-wide committees?
• How can you promote an occupational therapy presence at university-wide opportunities such as grand rounds, symposiums, poster sessions, strategic planning meetings, and community initiatives?
• Who determines the community initiatives in which the institution is involved? Is there an interdisciplinary directive to such endeavors? Are there opportunities for occupational therapy practitioners to proactively propose key initiatives?
• How is your university positioning itself globally? Are international students actively recruited? Are international branches of your university being initiated? Are there research
opportunities? If students request immersion opportunities in other cultures, how can you begin to explore this?

- What university departments have clinical, teaching, and research agendas for populations that you also serve? How has the university built the infrastructure to support those departmental efforts? Are there opportunities for interdepartmental collaboration on projects?

- What are the private and public funding sources available in your region?

- What are the grant expectations and how much support is given to faculty for development of grants?

- How are teaching, research, and clinical practice valued toward granting promotion and tenure?

- What types of instructional teaching supports does the university provide for faculty?

- What library resources support the type of curriculum you want to deliver? For example, are there resources for problem-based or distance learning?

- What is the state of technology at your university? How can the needs of the occupational therapy program be integrated into the university’s technology plan?

- How do faculty development goals take into consideration the mission and plans of the institution and not just that of the occupational therapy school?

B. **Resources Needed in Order To Answer Key Questions**

Numerous resources are available to assist you in understanding how the context of a university can be understood and, to some degree, shaped. The resources listed below represent a starting point for discussion and decision-making. Gather these documents and make them available to your faculty for frequent review as you plan or adjust your curriculum:

- Mission and vision statements of the university/college;
• Institution’s organizational structure (whole institution and sub-unit)
  Provost/Dean/academic officers;
• Institution’s policies, procedures, and timelines for curricular changes;
• ACOTE Self-Study (if an existing program) or ACOTE Standards and self-study
  instructions (if new program);
• Strategic plan of university;
• National, regional, and local census data from the Centers for Disease Control and
  Prevention, U.S. and State Departments of Health, etc.;
• Information from chamber of commerce, such as the economic profile of the area;
• State government information on labor trends, health disparities, etc.;
• Primary employers of occupational therapy and types of occupational therapy practice in
  this region;
• Places where occupational therapy practitioners are needed and could be needed in the
  next 20 years;
• OT State Association initiatives, such as strategic plan, community initiatives, etc.;
• AOTA strategic initiatives and AOTA Centennial Vision;
• Community needs documented by various organizations (school districts, etc.);
• OT professional resources such as the *Occupational Therapy Practice Framework*
  (AOTA, 2008); practice guidelines;
• Student profile/enrollment data;
• Social service agencies that are present in the community;
• State legislative environment;
• Regulatory information (i.e., state licensure requirements);
Available mentors (within the university, and the occupational therapy profession)

C. Key Questions To Consider

As stated earlier, you must understand your university to develop or make changes in the curriculum. For example, you should know how the number of credits for a degree is determined. Credits are generally tied to revenue, so when you begin to alter credits or courses, there may be institution-wide policies to consider.

- Where is the occupational therapy program within the structure of the university’s organizational chart?

- With which parts of the institution’s mission statement does occupational therapy clearly align?

- How are the university and occupational therapy program funded?

- How are the requirements of credit hours set and how can this be altered if needed?

- What is your program’s role within the institution? Is it the only professional program or is it one of several?

- What is your program’s role within the community?

- Who in the institution is supportive of occupational therapy?

- Who else should you talk to at the institution in order to understand the culture and climate (politics) of the institution?

- What are the trends that helped shape the university’s initiatives? How does occupational therapy align with those initiatives?

- Are there other programs for occupational therapists or occupational therapy assistants in your region? What is the relationship between these institutions and your institution or occupational therapy program?
D. Fieldwork Integration

- What types of fieldwork opportunities are available or need to be developed to match the institutional mission of the university and occupational therapy program? What type of fieldwork opportunities focus on community-education outreach, health literacy, or other such opportunities at the organization and population level?

- How have fieldwork sites been developed and fieldwork educators trained to match the occupational therapy program’s mission and vision?

- How are fieldwork educators drawn on to advise the curriculum with current trends in the populations they serve? Do they understand the mission of the university and the occupational therapy program, and the importance of how those missions are reflected in the preparation of the student for practice?

- As the university mission changes and looks ahead to the next decade, what is your plan for developing your fieldwork program to meet the changing health care needs of society?

E. Additional Suggestions

- Sponsor a health care debate or meet with city and state officials to help brainstorm possible emphases of the curriculum to meet societal needs. Meet, for example, with the Mayor’s Office on Disability, the city’s Housing Commissioner, or your state representatives, all of whom will have information that can assist in shaping the curriculum.

  - Identify possible curriculum content and student activities that can be connected to national, regional, or local trends and need.

  - Analyze current health care policies.
- Discuss the theory of person/environment fit; work with the visitor’s bureau to map accessibility of area restaurants.

- Analyze communities for accessible playgrounds, which could be done through a student class project in which they design a playground, taking child development, disability theory, and universal design into consideration.

- Work with organizations that offer services to immigrant and refugee populations in your area. What are the health care needs of populations in your area? How are students prepared to meet these needs and to engage other students within the university to meet needs through an interdisciplinary approach?

- Meet with academic officers, such as deans, provost, chancellor, and so on, to help the occupational therapy program put all the gathered data into perspective with the institution’s and/or division’s strategic plan.
  - Bring in gatekeepers annually to keep them informed of all the different faculty community initiatives and research.
  - Invite them to student presentations.
  - Publish stories in the university publications about how your curriculum is shaping experiences for your occupational therapy students.
  - Strengthen your regional response to health care directives, and disaster response and recovery efforts.
  - Build on the interdisciplinary mission of your own institution.
Explore interdisciplinary university collaboration for student research opportunities.

Educate students from other disciplines in your occupational therapy courses. Cross-registration for psychology, social work, education, women’s studies, philosophy, business, disability studies, and occupational science are excellent opportunities to foster collaboration.

Invite faculty from other disciplines to teach your students. The director of health literacy and translational language services at your local hospital, your business school’s director of the entrepreneurship program, and so on, are examples of key faculty that can greatly inform your students while increasing the visibility of your program.

Read international journals to discover the state of health care worldwide; engage with WFOT.

- Develop support systems to use existing and developing technologies fully to create a dynamic learning environment for the students. Keep the university library system informed of your needs.

F. Questions from the AOTA Centennial Vision Statement To Strengthen Connections Between Institutional Contexts and Other Sections of the Model Curriculum Guide

- How does the context of the institution data collected and analyzed relate to the elements of AOTA’s Centennial Vision?
  - Powerful/Widely Recognized
  - Science-Driven/Evidence-Based
  - Globally connected workforce
Diverse workforce
Meet society’s occupational needs

- How does the context of the institution data collected and analyzed relate to the six focused practice areas related to the AOTA vision?
  - Children and Youth
  - Productive Aging
  - Mental Health
  - Health and Wellness
  - Work and Industry
  - Rehabilitation, Disability, and Participation

- How are the six AOTA practice areas represented in the university’s mission statement, strategic plan, and health care initiatives?

- How do the AOTA vision statement, six related practice areas, and the fit with the institution influence the occupational therapy program’s mission and curriculum?

G. References and Further Readings and Resources (bibliography)

References


Further Readings and Resources (bibliography)
AOTA/AOTF Ad Hoc Committee Reports and planning documents. Available at


U.S. Census Bureau Web site at http://www.census.gov
II. Profession’s Philosophy, Vision, and Trends

A. General Description of the Importance of the Section

Society recognizes and rewards a profession to the degree it is able to satisfy a social need (Kielhofner, 2004). Because society is not static, a profession must continually evolve and change in order to assure its relevance (Edwards, 2005). The word profession implies that there is some sort of recognizable body of knowledge and an organized entity that oversees the duties and conduct of its members (Abbott, 2001; Curry, Wergin, & Associates, 1993). At the same time that a profession evolves, it must maintain a stable identity from which it can respond to changing societal needs. Such identity is contained in the philosophy of each profession (Dower, O’Neil, & Hough, 2001).

The philosophy of a health profession contains its core concepts, which inform its approach to health and the types of services it offers to the public (McDonald, 1995). These core concepts remain relatively stable over time yet support the adaptability of the profession (Abbott, 2001). Polkinghorne (2004) dubbed these “Fundamental and Powerful (F&P) Concepts” because they form the most basic filter through which members of the profession should view the world and consider the contributions they can make. An F&P concept is one that can be used to explain or think out a body of questions, problems, information, and situations. All fields have F&P concepts, but there are a relatively small number of them in a particular area. They are the most central and useful ideas of a discipline. If students can understand these F&P concepts in a profound way, they will be in a position to understand a great deal about the field. Professional education is, essentially, a process of learning to think in terms of the F&P concepts of the discipline, of learning to use them to think through any new problems or questions that arise (Barnett & Coate, 2004).
Occupational therapy, like other professions, has not been static. It has evolved and changed since its founding in 1917. However, a review of writings from leaders of the profession suggests that there are four F&P concepts in occupational therapy that have remained stable even as our understandings of them have deepened (Padilla, 2005). These concepts include “occupation,” “function,” “independence,” and “therapy.” Because of occupational therapy’s specific view (filter) of human “function,” we have devised a profession committed to intervening through a “therapeutic” process that uses “occupation” to lead to higher levels of “independence,” health, and well-being (AOTA, 2006). These concepts are those to which the profession has returned again and again as part of the context it uses to explain itself internally and externally.

The philosophical base, and therefore the profession’s F&P concepts, serve as the platform from which members of the profession can shape their work in anticipation of changes in society. The Vision of a profession articulates a desired evolution in its body of knowledge and organization (and the implementation of its F&P concepts) so that its relevance to society is more widely recognized and, thus, its contribution can be realized some time in the future. A vision statement, then, is a profession’s response to both its historical foundations and social trends (Abbott, 2001; Polkinghorne, 2004) and an articulation of how it can uniquely address them.

A professional curriculum is responsible for teaching students the F&P concepts of the profession, as well as preparing them to anticipate future social needs to which those F&P concepts may be relevant so they can articulate the professions’ response (Barnett & Coate, 2004). Thus, a curriculum should be simultaneously future-oriented (Jackson, 2006) and well...
grounded in a philosophical base that helps future professionals become part of a profession that is both recognizable and adaptable.

AOTA has articulated a Centennial Vision (2007) that paints a picture of the capabilities of professionals by 2017:

_We envision that occupational therapy is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society’s occupational needs._

In relation to the Centennial Vision, AOTA identified six focused practice areas that reflect anticipated needs in society in the next decades. These include (a) productive aging; (b) work and industry; (c) mental health; (d) health and wellness; (e) rehabilitation, disability, and participation; and (f) children and youth.

This vision statement is based on the anticipation of particular trends in the United States and the world. A vision statement, such as this one, stimulates our thinking and requires that we ask ourselves a strategic question: “What must the profession of occupational therapy do during the next few years to best position itself for the world of 2017 and beyond?” Ultimately, educational programs play a key role in achievement of the vision statement, and therefore are particularly responsible for its realization. The AOTA Centennial Vision can be divided, for example, into several portions to be addressed in a curriculum: (a) preparing students to be _powerful_ leaders; (b) preparing students to market professional services so their value is _widely recognized_; (c) preparing students to understand, use, and contribute to _scientific inquiry_, particularly in the form of _evidence-based practice_; and (d) preparing students to make linkages with people and knowledge from _across the world_ and be able to meet diverse needs. An
academic program could address these attributes by including coursework on leadership, international fieldwork experiences, and so on.

Because the academic program is located in a specific institution with its own particular mission and context, its occupational therapy curriculum should be shaped to address the profession’s vision in its own way and using its own resources. For example, if a program is situated in a college that emphasizes liberal arts education, the occupational therapy curriculum may be designed to focus on the development of understanding of diversity and global trends while at the same time assuring basic competence as occupational therapists. A different program may be located in a research-intensive institution. The curriculum in that case could be shaped to emphasize the development of skills needed for testing ideas, conducting translational research, and so on. In other words, it is the combination of the profession’s philosophy and vision, together with the particular institution’s mission and context, that fuels the design of a curriculum that can address particular present and anticipated social needs.

B. Resources Needed in Order To Answer Key Questions

Numerous resources are available to assist one in understanding how the mission of professions is developed over time and how future trends can be anticipated and, to some degree, shaped. The resources listed below represent a starting point for discussion and decision-making:

- Essential resources related to the philosophical base and practice of the profession, include:


• Resources related to understanding local, regional, national, and global social needs, such as:
  


• Resources related to futurism and anticipating trends:
  


C. **Key Questions To Consider**

- Are all departmental faculty members (full-time, part-time, and adjunct) intimately knowledgeable of the philosophical statement of the profession? How do they use the philosophical statement to shape what they teach? How do they integrate this base into learning activities?

- Have all department faculty members read the AOTA Centennial Vision and do they understand the process used for its articulation? In what ways can the program contribute to that vision? Does the institution’s mission and context support a particular portion of the vision more than another? Are there particular ways in which the curriculum can connect the profession’s philosophy, vision, and trends with the mission of the institution as well as local community needs and anticipated trends?

- How can the curriculum prepare entry-level practitioners to address all areas emphasized in the AOTA Centennial Vision statement if the institution’s mission appears to match only one portion of the vision?

- To what degree does the program address current and future practice?

- What is the synchronicity of key local, regional, national, and international trends identified as the context of the institution (see Chapter I of this Guide) with the profession’s philosophy, mission, and vision?

- How do faculty re-articulate the profession’s philosophy in their own work and in the courses they teach?
• Can each faculty member articulate the profession’s philosophy in various ways so different audiences can understand it?

• What does AOTA’s vision mean to the faculty? Do they agree or disagree with it? What would they add or alter? The vision was developed in 2006; how are you shaping a new vision for your program?

• Does your program’s strategic plan respond to the profession’s vision?

D. Fieldwork Integration

• Are students prepared for current practice while able to articulate anticipated changes in society in the areas articulated in the AOTA Centennial Vision?

• Do fieldwork education sites consistently support occupation-based practice that explicitly addresses the fundamental and powerful concepts of the profession?

• How are nontraditional fieldwork settings and placements in emerging practice areas organized? How congruent are the missions of these settings with our profession’s mission, vision, and philosophy?

• Has the program shared the AOTA Centennial Vision with its fieldwork sites and supervisors, or has it planned in-services or workshops to do so?

• Does the program include AOTA’s mission/philosophy statement in the materials and documentation that it sends to the fieldwork sites?

E. Specific Suggestions

• Form an interdisciplinary network at the institution focused on understanding trends and future needs of society.

• During annual curriculum reviews, revisit the occupational therapy philosophy and the AOTA Centennial Vision to determine their integration into the curriculum.
G. Connection to Other Sections of the Model Curriculum Guide

- Although one academic program cannot address all current and future needs of society, it can provide an overview as well as develop emphases that are consistent with the *mission of the institution* and the *context* in which the institution exists. Thus, a curriculum represents the integration of the mission of the institution and the mission of the profession into a unique academic program (see Chapter I).

- An academic program will uniquely address a specific set of social trends and/or needs viewed through the lens of the philosophical base of the profession. Thus, an intimate understanding of the philosophical base and professional trends is needed in order to articulate desired *abilities-based outcomes* graduates will reach and the *learning strategies* that will be used to reach them (see Chapter XI).

- Make plans to integrate experiential components related to emerging and/or nontraditional practice when the curriculum is designed or revised. Integrate assignments in the curriculum that require students to design service programs that are responsive to social trends while remaining well grounded in the profession’s philosophical base (see Chapter XII).

H. Further Readings and Resources (Bibliography)

See the reference list as well as resources needed to answer key questions.

References


III. Program’s Philosophy, Mission, and Vision

A. General Description of the Importance of the Section

The mission, vision, and philosophy of the program shape what is offered in the curriculum, thereby aligning curriculum, profession, and institution. The mission, vision, and philosophy serve as the lens through which all elements of the curriculum are planned, implemented, and evaluated so that the curriculum, as a whole, is coherent. The philosophy, mission and vision integrate the program, and serve as a standard against which all decisions or elements are measured. When curricular actions are contemplated—such as addition of content, assessment strategies, or pedagogies to implement—they should be evaluated in terms of coherence with or contribution to the program’s philosophy, mission, and vision. These are, in a sense, interconnected parts of a logical articulation of the purpose of the program.

A program’s philosophy, vision, and mission is based on:

- The profession’s philosophy
- The profession’s vision
- Trends in the profession
- Trends in society
- Mission and vision of the institution
- Context of the institution
- Faculty philosophies
- Faculty values and goals

The program’s *philosophy* is a broad statement that identifies the values and/or beliefs on which the program is based. The philosophy often includes statements about the meaning of
education, what it means to be an educated member of society, the meaning of learning, and the creation of knowledge.

**Example 1:**

*The Philosophy of XYZ University Department of Occupational Therapy embraces the Philosophical Base of Occupational Therapy stated by the American Occupational Therapy Association (1979):*

*Man is an active being whose development is influenced by the use of purposeful activity. Human beings are able to influence their physical and mental health and their social and physical environment through purposeful activity. Human life is a process of continuous adaptation. Adaptation is a change in function that promotes survival and self-actualization. Biological, psychological and environmental factors may interrupt the adaptation process at any time throughout the life cycle, causing dysfunction. Purposeful activity facilitates the adaptive process. Purposeful activity (occupation), including its interpersonal and environmental components, may be used to prevent and mediate dysfunction and to elicit maximum function. Activity as used by the occupational therapist includes both an intrinsic and a therapeutic purpose. (p. 785)*

*In concert with this philosophy, we assert the following belief statements concerning the nature of occupation and the beliefs about human beings.*

- Occupation as a product is the group of activities and tasks humans need, want and/or are obliged to do for participation in life
- Occupation involves a continuing process of adaptation
- Characteristics of occupation include, but are not limited to the following:
  - Basic human need
  - Determinant of health
  - Source of meaning
  - Source of purpose
  - Source of choice and control
  - Source of balance and satisfaction
  - Source of pleasure
  - Source of restoration
  - Source and means of adaptation
  - Means of productivity
  - Means of organizing time
  - Means of organizing materials and space
  - Therapeutic medium

*Beliefs about human beings*

- Humans are unique in nature and influence their own occupational performance
• Humans are considered open systems who are influenced and changed through interactions with the human and nonhuman environment
• Humans have their own unique values, goals, desires, culture, etc., which influence their occupational performance
• Humans have the right to make personal choices, engage freely in society, and self-determine their life path
• Humans adapt their habits, routines, and roles throughout their life course
• A human being’s strengths and needs are an integral part of his/her meaningful occupations


Example 2:

The University of ABC Division of Occupational Therapy’s philosophy is guided by two major areas. These areas are occupation and the occupational being; and the professional curriculum and the learning-teaching style.

The philosophy of the Division is based on the idea that to be true to the complexity of human beings one must look at them as occupational beings that exist within the context of environment and time. Occupation is the process as well as the outcome that structures a person’s life—positively or negatively—and, at whatever level, gives life purpose and meaning.

Viewing a human within the framework of this complexity is challenging. However, to truly understand occupation, how it influences human beings, and what to remediate when occupation is challenged, a means to describe the phenomenon of occupation within the complexity must be articulated. Only then can it lead to solutions for the barriers. To reduce it to single elements tends to take away the real essence and combined meaning of occupation. These factors form a delicate dance to the rhythm of life, both internally and externally, and are critical to the understanding of occupation.

Given this philosophical base of occupation and occupational beings, the program that will educate occupational therapists who have a strong professional identity, a knowledge of occupational theory, and the ability to provide effective intervention to occupational barriers must also have a strong learning-teaching philosophy. The Division is based on the idea that learning is active and is valued as a lifelong process. As suggested by AOTA (1997), the learner will be involved in an integrated process that is collaborative and combines academic knowledge with experiential learning and mentoring from faculty and clinicians.

The program’s mission elucidates the particular needs or goals, in broad social terms, that the program serves. In other words, it states the particular focus or purpose of the program.

Mission statements often communicate who is being educated, the purposes for which they are
being educated, and the contributions the program wishes to make to the profession or society as a whole.

Example 1:

The Department of Occupational Therapy in XYZ University’s School of Culture, Education, and Human Development is committed to the development of outstanding, ethical practitioners, leaders, scholars, and researchers in the field of occupational therapy who are prepared to respond to society’s ever-changing needs.

We do this by creating a community of scholars, researchers, teachers, and students devoted to the advancement and transmission of knowledge, and to the application of research to practice. The Department offers curricula that balance academic, scholarly, and practical experience through clinical placements and collaborative research. Graduates are prepared to work in a variety of environments, such as schools, homes, hospitals, and other community settings.

Within the Department of Occupational Therapy, we embrace the values and goals of the University and the … School as an integral part of this private common enterprise university. The Department is located in the heart of …, an urban center of diverse populations, and is positioned to serve the educational and health-related needs of communities that include ….

Our faculty members promote nondiscrimination and inclusion in every aspect of their relationships with other faculty, staff, students, and others without regard to gender, sexual orientation, marital or parental status, culture, ethnicity, color, religion or other beliefs, national origin, age, or disability.

The Department builds on its tradition of academic excellence, rigorous programs, and contributions to the profession’s body of knowledge by meeting the following goals:

1. Offering programs that meet professional standards, address societal needs, and respond to our graduates and the community.
2. Promoting diversity and equality.
3. Conducting research that is relevant to occupational therapy.
4. Enhancing educational programs by translating research into educational experiences.
5. Strengthening the quality of occupational therapy services through collaborative research and strong community relationships.
6. Modeling exemplary professional behavior through active involvement in university, school, and professional organizations.
7. Addressing academic and practical experiences in all programs.
8. Adapting and creating programs to meet current and anticipated needs of students and society.

Example 2:
The fundamental mission of the Occupational Therapy program is consistent with that of the University and the College of Health. The program seeks to transmit, discover and investigate knowledge—both old and new—related to occupation, occupational therapy, occupational science and society in general, and to provide the highest quality education to students of occupational therapy, based on contemporary theory, practice, and technologies.

The program seeks to provide service to the immediate academic, professional, and general communities in which the Occupational Therapy Program resides and address the needs for occupational therapy in the community, state, and region. This will be accomplished by educating entry-level practitioners and other related professionals and providing consultative, advocacy, and disability prevention services to the community.

The program’s vision articulates the outcomes of a program at some time in the future.

Example 1:

*Through education, scholarship, and service, the University of ... Occupational Therapy Graduate Program facilitates individuals’ wellness, productivity, participation, and quality of life within their community. Program core values include accountability, community involvement, commitment to excellence, innovation in education, scholarship and practice, promoting individuality while celebrating diversity, personal and professional growth, responsiveness, collaboration, and respect.*

Example 2:

*The Occupational Therapy Program of ... University will provide cutting-edge, student-centered instruction that develops practitioners who learn, practice, and lead in an interdisciplinary environment, and who are change agents committed to lifelong learning and high standards for the profession. The program will be nationally and internationally recognized through its scholarly contributions, and will be locally recognized as an authority and primary source for occupational therapy information and services related to occupation, function, health, and wellness. In addition, the faculty and students of the program will be recognized as leaders within the profession through our collective service to AOTA and other professional organizations.*

If there are multiple programs within an occupational therapy department, the vision statement will describe how they are interconnected; for example, a bachelor’s degree may lead to admission into the master’s-degree program, or an MSOT and OTD program may overlap in certain ways, etc. Degree programs may have overlapping and/or integrated content and experiential components as well, which can be articulated in the vision statement.
B. **Resources Needed in Order To Answer Key Questions**

The resources listed below are useful in articulating the philosophy, mission, and vision of a program. Many of these resources are published documents that should be readily available at your institution:

- Mission and vision statements of the university/college (these will assist in connecting the program’s philosophy with the institutional context)
- Philosophy of the profession (this will assist in placing the program within the context of the profession)
- Information gathered to understand the context of the institution (Chapter I)
- Information gathered to understand the profession’s philosophy, vision, and trends (Chapter II)
- Latest ACOTE Self-Study with any previous vision, mission, and philosophy statements
- Individual (personal) philosophy statements from each faculty member (which may take some time to collect, but is useful in constructing shared perspectives)

C. **Key Questions To Consider**

- With what particular points in the profession’s philosophy statement does the faculty most resonate? Where are there differences in understanding or even disagreements? *For example, to what degree is there agreement on the statement that humans influence their physical and mental health as well as social and physical environment through engagement in purposeful activity?*

- What portions of the profession’s philosophy does the program want to emphasize or prioritize as the curriculum develops? *For example, holism, adaptation, etc.*
• Does the program want to expand on the profession’s philosophy? See examples of program philosophies above.

• What are the faculty’s views regarding the profession (e.g., what content is most important to know, what needs the most emphasis, what needs the least emphasis?) For example, competencies in understanding and participating in research, professional behavior, ...

• What in the institution’s mission and vision statements clearly aligns with occupational therapy as a profession? For example, community service, lifelong learning, innovative delivery systems, creative professional activity, etc.

• What in the institution’s mission and vision statements align with faculty values and what the program wants to offer students? For example, practice in the community in emerging areas such as homeless shelters, etc.

• What are the trends in the context of the institution? How do these influence the program’s mission and vision? For example, online education initiatives, delivery of services to the community via the Internet, etc.

• What are the trends in the profession? How do these influence the program’s mission and vision? For example, the focus on furthering evidence in the profession through research and using evidence in practice, specialization, etc.

• What are the trends in society? How do these influence the program’s mission and vision? For example, advances in and increased use of technology in treatment, etc.

• How are the program’s proposed mission, vision, and philosophy aligned with each other? Do they flow well together? Do they complement each other?
Can each member of the faculty articulate the mission, vision, and philosophy of the occupational therapy program with clarity?

D. Specific Suggestions for Development of Program Philosophy, Mission, and Vision Statements

- Read and discuss merits of various philosophies with all faculty members. This will allow a thorough understanding of where faculty members stand in their worldview and what shared philosophy can lay the foundation for the program.
- Read and discuss philosophies of other occupational therapy programs. For those new to academia, an examination of other professional program philosophies will assist in developing one’s own.
- Read and discuss merits of various educational philosophies with all faculty members. This is important in understanding concepts and principles of education, and beliefs about how knowledge should be transmitted.
- Have each faculty member write a personal philosophy statement. Come together to explore similarities and differences. Integrate the various statements into a single philosophy statement for the program.
- Make direct connections between the vision statement you develop for the occupational therapy program and the philosophy you choose as a guide. In addition, relate the occupational therapy program’s vision to the vision for the profession and the vision for the university. The congruence in these documents is necessary and required for a program to appropriately serve its constituents.
- Ensure that the program mission is derived from and related to program vision and philosophy. This congruence is also important for having a cohesive program.
E. **Fieldwork Integration**

Fieldwork is addressed in each section of this Guide because of its importance for occupational therapy education. Implications for fieldwork should be considered at each step of curriculum development, including early on when the program’s vision, philosophy, and mission are being developed. The following questions illustrate the importance of considering fieldwork at this early stage:

- What types of fieldwork sites (opportunities) are available to match the program philosophy and mission? *Example: A small hospital in the community that does occupation-based practice and a private pediatric practice doing family-centered care are both matches to an occupation-based curriculum.*

- How can the fieldwork sites be developed to match the program philosophy and mission? *Example: After identifying sites that are amenable to the type of interventions/practice being taught, provide continuing education on curriculum design, explain curricular threads, discuss how practice is taught to the students, and what faculty are emphasizing. Assist fieldwork sites in brainstorming how to facilitate the practice environment needed for students to experience continuity in education from the classroom to the fieldwork site.*

- Is fieldwork represented in the core mission of the program, and is integration of classroom and clinical practice part of the vision? *Look for key words within the mission and philosophy statements to indicate the type of fieldwork education the program is envisioning.*

- Have area clinicians had input into the program’s core mission and vision? *Is there an advisory council in place to assist the program in developing its curriculum? An*
advisory council formed by clinicians from the community, consumers, students, and
local government officials can provide perspectives to enhance the program.

- Are continuing education opportunities offered by the department that reflect the
  program mission and vision? For example, if the promotion of evidence-based practice
  is part of the mission, when a continuing education opportunity is offered, make sure
  the evidence supporting the topic is included in the presentation. Many times continuing
  education is provided to fieldwork educators as a reward for supervising the program’s
  students.

- What is the mission of the state occupational therapy association and does it address and
  inform the program’s choice of fieldwork sites? Look for congruence in these ideas.

F. Connection to Other Sections of the Model Curriculum Guide

- Is there congruence between the program’s mission and vision, and institutional mission
  and vision? How do they relate to the context of the institution? (See Chapter I)

- Is there congruence between the program’s mission and vision, and the profession’s
  mission and vision? How does it relate to the trends anticipated in the profession? (See
  Chapter II)

- Are the vision, mission, and philosophy statements clear so that abilities-based
  outcomes can easily be identified? (See Chapter XII)

- Are the vision, mission and philosophy statement clear enough to guide the selection of
  curriculum content and sequence? (See chapters V, VI, VIII, and XI)

G. Further Readings and Resources

- SWOT Analysis Resources


• Futurist Texts:
  


IV. Philosophical Frame for Learning/Identification of Abilities-Based Outcomes

A. General Description of the Importance of the Section

Academic occupational therapy programs need a philosophical frame for learning in order to articulate intended abilities-based outcomes that will in turn be operationalized throughout the curriculum in order to fulfill the program and institution’s mission, as explained in Chapter III. A philosophical frame for learning is a set of beliefs about the processes by which people learn and change. Ultimately, the philosophical frame for learning is the faculty’s foundational beliefs about knowledge and how people obtain knowledge; thus, it goes beyond naming an educational theory, such as adult learning, student-centered, or Bloom’s taxonomy (Anderson et al., 2000), as the program’s adopted philosophy. The philosophical frame for learning explains what the faculty believes about how learning occurs; what facilitates learning; what roles the educators, learners, and context or environment play in learning; and what constitutes evidence that learning has occurred. As discussed in Chapter IX, the philosophical frame for learning explains further how the adopted tenets guide the design of learning experiences, selection of instructional processes, assessment/grading strategies, roles assumed by the educator, and roles of the learners.

A philosophical frame for learning also shapes the mental and emotional images that faculty hold, portraying what learning looks like once it has occurred. In other words, philosophies of learning inform faculty, often tacitly, about what outcomes should be visible in students if they have learned.

The abilities-based outcomes help portray what students are able to do as a result of learning, including the ability to conceptualize, use complex reasoning, and synthesize ideas. Abilities-based outcomes are statements that attempt to capture those imagined and intended
results that indicate learning has taken place. They include statements about what students are expected to know, apply, integrate, care about, and be aware of in themselves at the end of an assignment, class, course, or the curriculum as a whole. These outcomes are observable and measurable, and operationalize how you want graduates from your program to “look.” Intended outcomes work in tandem with the philosophical frame for learning to guide selection of instruction processes.

B. Resources Needed in Order To Answer Key Questions

To formulate a philosophical frame for learning and articulate abilities-based outcomes, several key questions must be asked. These questions are listed in Section C below. The resources needed to answer these questions are as follows:

Resources from within the program:

- The mission, philosophical, and vision statements of the institution and occupational therapy department
- Descriptions of the most common learning experiences designed by educators in the program
- Copies of assignments and grading strategies
- Objectives for each course, class session, and assignment as available.

Resources from outside the program:

- Resources on learning theories and creating instructional objectives (see list in Section H below)

C. Key Questions To Consider in Developing the Philosophical Frame for Learning and Abilities-Based Outcomes
With the resources listed above in hand, the following questions can be used to inform and guide the formulation of a philosophical frame for learning and a list of intended abilities-based outcomes. The questions are based on the assumption that a philosophical frame for learning is present, whether explicitly described or not, in what is happening every day in the program’s courses of study.

**Philosophical Frame for Learning**

- What are the implicit and explicit beliefs about learning embedded in what you are doing well? How can we translate those implied beliefs into a statement about your philosophical frame for learning?
- What other implicit and explicit beliefs about learning are present in the current educational practices in the program (as evidenced in the everyday educational processes and materials)?
- Does each faculty member understand, agree with, and deliver a curriculum based on a particular learning theory or theories? How can we incorporate those into a philosophical frame for learning for the entire program?
- Out of the existing implied or explicit beliefs about learning, which ones do we want to incorporate into our philosophical frame for learning? Which ones do you want to move away from at this point in our development?
- How do you inform students about the learning theories that guide the program?
- Which instructional practices and beliefs about learning are most in line with the outcomes we desire? If we were to translate those practices into a philosophical frame for learning, what wording would we use?

After trying to formulate a philosophical frame for learning from what is already happening in the curriculum, revisit educational research on how people learn:
• What are the established learning theories in education that are relevant to occupational therapy and to this curriculum?

• How do current beliefs of learning that are enacted in the curriculum align with best-practice theories in education?

**Abilities-Based Outcomes**

• What do you want students to “look like” when they leave the program and university/college. What will make them recognizable as students from *this* program?

• How can we translate that image of your graduates into objective, behavioral, measurable outcome statements?

• What lasting impact do you want each assignment, exam, and course to have on students? How can you translate these desires into objective, behavioral, measurable outcome statements?

• What are you currently doing in your courses that support the development of an ideal graduate and the outcomes that describe him or her?

**D. Fieldwork Integration**

To help ensure consistent experiences and expectations among students, the philosophical frame for learning, and the abilities-based outcomes that ensue from it, should be common across all dimensions of the professional education program, including the fieldwork components. Consider the following questions to help integrate these into the design of field experiences:

• What are clinical educators now doing that support the program’s philosophical frame for learning?

• What abilities-based outcomes are currently supported in the clinical education program? Are they consistent or inconsistent with those you desire?
• How can you teach clinical educators about your philosophical frame for learning and their role in enacting it? How can you teach them about best-practice educational theories and practices?

• In what ways has the program provided clear information about its theory and practice of teaching/learning in the information given to the fieldwork sites?

• How can you assure that the fieldwork experiences help lead to the student outcomes you desire?

E. Specific Suggestions

To help answer the questions above and to discern beliefs about learning and professional education outcomes, consider the following activities:

• Brainstorm the lasting impacts you imagine the curriculum might have on your students 5 years from now. List those. Then practice writing them in measurable outcome statements.

• Conduct a peer-review process of each other’s teaching. Design an observational matrix that gets beyond looking at specific classroom techniques used, but instead helps look for implicit theories of learning used in the classroom. Analyze the matrices as a whole for what the matrices say about implicit learning theories enacted in the curriculum. Translate this analysis into a philosophical frame for learning.

• It could be fun for faculty members to collectively review videotaped segments of classroom processes and as a group discuss what learning theories seem present. Incorporate the desired theories into a philosophical frame for learning.

• Use peer-teaching observations to discuss how particular learning processes support intended learning outcomes for the class and the curriculum.
Complete a content analysis for learning theories and intended outcomes of select educational materials in the curriculum. For example, take an assignment from each instructor. What beliefs about learning are inherent in the assignment? Could the assignment be better aligned to the overall program’s collective beliefs about learning?

Develop faculty study groups to examine specific learning theories, and come to a programmatic consensus to determine which model(s) best meet your program philosophy, mission, and values.

Review the learning objectives for each course and for the curriculum as a whole. Analyze the objectives for the degree to which they clearly point students to the observable behaviors and traits they should be working on as a student in this program.

Remember that abilities-based outcomes are not the same as ACOTE Standards. Practice writing abilities-based outcomes that are representative of the program and are not a duplication of the Standards. You can link your abilities-based outcomes to the Standards later in the curriculum design process.

G. Connection to Other Sections of the Model Curriculum Guide

This section is key for subsequent elements such as content (Chapter VIII), learning strategies (Chapter IX), and curriculum sequence (Chapter XI). Your philosophical frame for learning and your statements of desired abilities-based outcomes should guide each of those elements.

Consider the following questions as means to create links to previous and subsequent elements of curriculum design:

To what degree does the program’s chosen philosophical frame for learning reflect the institution’s philosophies?
• To what degree does the program’s chosen abilities-based outcomes reflect those sought by the institution?

• To what degree is the program’s philosophy for learning evident in the content, instructional strategies, and learning sequences?

• To what degree are the program’s abilities-based outcomes supported by the content, instructional strategies, and learning sequences in each course and in the curriculum as a whole? Where are the inconsistencies?

• How are the overall abilities-based outcomes for the curriculum reflected in the objectives for each course?

H. References and Further Readings and Resources (Bibliography)

References

Further Readings and Resources


V. Curriculum Design

A. General Description of the Importance of the Section

In its broadest definition, *curriculum design* is planning everything that happens in a program from student recruitment through conferral of the degree at graduation. It is the mission, vision, and philosophy in action. In its more narrow definition, a curriculum “design” is a visual representation of the concepts that are most important in the curriculum and the way in which those concepts are interconnected. Similar to a Boolean diagram, this map or pictorial guide conveys the foundational concepts of your program. Concepts could include universal or core curricular threads such as critical thinking, professional reasoning, theory, person–community–population continuum, research and evidence-based practice, diversity/globalization, sociopolitical climate, occupational needs of society, participation (citizenship), occupational justice, leadership, advocacy, futurism, entrepreneurship, professionalism, technology, tele-health, or other concepts that you believe reflect the beliefs, values, and mission of your institution and occupational therapy program. Various types of relationships can be drawn between the concepts and described in an accompanying narrative. The curriculum design should give direction to strategic initiatives, course development, faculty hires, and research and practice initiatives. Courses and objectives, individual lectures, student assignments, and fieldwork site choices—all should match to this design. Everything that you teach should be related to and consistent with the curriculum design. Curriculum designs should be referred to frequently for these purposes and be explicitly connected to what happens in courses.

For example, if *participation* is a core concept that appears in a curriculum design, then participation threads should be found in many courses in the curriculum, and be reflected in
faculty expertise and research pursuits. In addition, this concept should be part of class assignments, such as collaborating with a community agency to assess community residents’ participation in a Meals-On-Wheels program. Assessment of and intervention in participation level should be an identified theme of fieldwork sites. Even an anatomy course can contribute to the curricular “map” of participation through applied readings and assignments that consider how muscles change with activity. Student participation in a school backpack awareness day can be seen as connected to learning about a child’s ability to participate in the school day with a weighted load on his or her back that affects musculoskeletal development. Similarly, the AOTA CarFit initiative addresses body mechanics, universal design, and comfort so that individuals can drive in their community and participate in the activities that they desire. The curriculum design would depict participation and the connections this core concept has to other identified core concepts. All boxes, bubbles, or other images representing the curriculum should connect, like dots! This visual design is a major communication tool for quickly conveying the curriculum structure to all stakeholders.

Building on the work from previous chapters, a curriculum design begins with understanding the context of the institution; the profession’s philosophy, vision, and trends; and your own occupational therapy program’s philosophy, vision, and mission. Without this understanding, a curriculum design cannot be accurately developed or graphically depicted.

B. **Resources Needed in Order To Answer Key Questions.**

- **Time** set aside to meet as a faculty to discuss the images that conceptualize the curriculum.

You will also need to set aside time to write a narrative that accompanies this design. Consider the optimal meeting format to ensure that your faculty can devote full attention to the discussion and development of a design.
• A graphic artist or faculty member versed in computer graphics. Locate a graphic artist who can help you. Determine how graphic art will enhance the visual development of your design.

What are the available resources for this work?

• Collaborative input from alumni, fieldwork educators, and community advisory board members. They can help you determine whether the design is too restrictive or not representative of your curriculum, or whether connections are too linear. Discuss the fluidity of your design.

• Work completed on analyzing the context of your institution, writings about profession’s philosophy and vision identifying major trends in society, and your own occupational therapy program’s philosophy, vision, and mission statements.

C. Key Questions To Consider

• What are your curricular threads (see Chapter VI) or core concepts on which your curriculum is built?

• How are the curricular threads or core concepts of your curriculum related to your program’s philosophy, vision, and mission?

• How will your design be three-dimensional to allow an appreciation for conceptual interconnections?

• How does the curriculum design clearly and quickly convey and describe the uniqueness of your curriculum?

• How do the outcomes of your curriculum clearly connect to your design? How will you use the design in educating key stakeholders about your curriculum?
• How will your design accommodate small or incremental changes in the curriculum? Will it need to be re-designed every time you make a change in the curriculum? If so, it may be too detailed.

• What barriers did you encounter to developing a design, using it to visually represent your curriculum?

D. Fieldwork Integration

• Consider how to familiarize fieldwork educators with the curriculum design. If they are able to explain it, they will be more likely to make sure that the fieldwork experience has continuity with the classroom learning.

• Can your students describe how fieldwork experiences fit in the curriculum design?

• How does fieldwork site selection reflect your design?

• How do you cultivate relationships with fieldwork sites that use your design? Do fieldwork sites that employ your graduates continue to reflect the design in the way they deliver their programs?

• Offer continuing education to fieldwork educators in content areas that reinforce the curriculum design.

• How do you choose clinicians as adjunct faculty who understand and teach to your design?

E. Specific Suggestions

• Talk to other program directors about their curriculum designs. Gather several examples to stimulate your ideas.

• Analyze curriculum designs from other disciplines besides occupational therapy.
• Map your curriculum according to the elements of the design to make sure all courses and requirements are congruent with the design. Map course objectives and course assignments to the design.

• Ensure the titles of your courses reflect the language in the design.

• Develop course assignments that reinforce and build on the core concepts in the design.

• Review the design annually to make sure it represents the curriculum organization. An example of a visual representation of a curriculum design appears in Figure V.1.

Figure V.1. Graphic Representation

• Use the design for recruitment.

• Ensure that prerequisites make sense with the design.

• Identify how faculty research and community initiatives match the design.

• When designing new courses, include content represented in your design.
• As you carefully consider your core concepts, integrate AOTA’s Centennial Vision and the six priority practice areas. Be able to describe how these are represented in your diagram, literally or figuratively.

G. Connection to Other Sections of the Model Curriculum

The visual design must reflect integration of all areas covered in all chapters of this Guide. As you proceed with the next aspects of developing your curriculum, keep your design in front of you! You will use it to map prerequisites, curriculum threads, course sequences, lecture topics, assignments, fieldwork opportunities, educational resources, and learning strategies that result in the desired student knowledge, skills, and attitudes.

H. Further Readings and Resources (Bibliography)

The readings listed below are excellent sources for identification of curricular threads. Any text that provides an overview of the profession and offers a proposed structure to its practice can serve for this purpose. The list below is not all-inclusive:


VI. Curriculum Threads

A. General Description of the Importance of the Section

Curricular threads or themes are identified by the program as those areas of study and development that follow a path through the curriculum and that represent the unique qualities of the program as demonstrated by their graduates. Threads are not necessarily present in every course of the curriculum, but are visible in several courses, objectives, teaching/learning strategies, and assignments. These themes or threads ensure that the program is responsive to the needs of the individual, the profession, and the broader society. They are typically based on the profession’s and program’s vision, mission, and philosophy (see Chapters II and III).

Examples of core curricular threads or themes to be represented in occupational therapy programs may include:

- Critical Thinking/Professional Reasoning
- Research and Evidence-Based Practice
- Diversity/Globalization
- Occupational Needs of Society
- Leadership in Practice and in Health Policy
- Participation and Engagement
- Technology
- Other

The AOTA Centennial Vision (2007) has articulated some important potential threads for a curriculum. Such potential threads appear in bold emphasis below:
“We envision that occupational therapy is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society's occupational needs.”

Additional threads are tailored to the uniqueness of your program and may emphasize specific practice niches or areas, such as those AOTA has identified as priority for occupational therapy, including (a) productive aging; (b) work and industry; (c) mental health; (d) health and wellness, (e) rehabilitation, disability, and participation; and (f) children and youth. Although all curricula must address all of these areas in order to prepare competent, entry-level therapists, any of them can be an area of emphasis or specialization represented in a curricular thread. Ideally, these threads help identify the program’s special or unique contribution to the profession and society. Although some curricular threads such as those listed above will likely be present in most, if not all, occupational therapy curricula because they reflect our profession’s promise to society, they may be blended creatively to reflect the mission of a particular program in a particular institution. These threads extend the profession’s “Fundamental and Powerful” concepts (see Chapter II) into the unique knowledge and skills expected of a graduate from a particular program. For example, a program housed in a religious university in a rural state may have a thread of “diversity and health disparities,” whereas a research university in a large metropolitan city may have a thread of “globalization and international practice.” We might expect that graduates from both institutions have knowledge about culture and diversity, but the first are more likely to be able to address the needs of underserved populations in rural areas, whereas the second are likely more prepared to serve the needs of immigrants. Upon review of these programs, we should be able to track how graduates...
are incrementally prepared to meet those needs. The unique curricular thread or theme should be present in key courses throughout the length of curriculum, including fieldwork.

Care must be taken to identify only the main themes that help uniquely identify a curriculum. Although labeled differently, all occupational therapy curricula should have threads related to occupation, practice, and evidence, which are easily identifiable and provide the basic knowledge and experience to practice as an occupational therapist. However, two or three additional unique threads or themes will help provide continuity between the university’s unique mission and that of the program. More than five or six threads in a curriculum may be difficult to track. These particular threads, therefore, provide an identity to a program and help justify its continued existence as a vital contributor to the university’s mission.

B. Resources Needed in Order To Answer Key Questions

One of the first steps will be to re-visit the previous work you have accomplished in developing your curriculum design: your program philosophy, and your mission and purpose. As you worked on developing your program’s mission or as you reviewed it to make sure it provided a shared vision for the faculty, themes may already have emerged that will help you identify curricular threads to be woven through the program and that will influence all outcomes. A summary of resources to help you identify and develop curricular threads or themes may include:

- The mission and vision statements of the profession, the university, and your program
- The shared and individual philosophies of the faculty and their expertise
- Documents that provide insight into the unique nature of your “community” and its resources and opportunities (e.g., census data, urban development plan, and so on)
• Listing of present and future trends identified in Chapters II, III, and IV of this Guide (these may inform choices for key information that may form additional themes and/or support those threads you have already selected)

• The work of scholars and futurists, including occupational therapists and others in the global community, that provides insight into the possible themes

For example, after careful review and discussion of your institution, your program philosophy, your community, and other factors, you have selected the quality of leadership as one theme or thread for your curriculum. Literature review and discussion have helped you identify what aspects of “leadership” you wish to emphasize and what your graduate “leader” will be. This thread of leadership may be represented by course content that will emphasize communication, negotiation, advocacy, business acumen, organizational structures and functions, and other content you may wish to include. You may include incentives for your students to assume leadership positions in student government, and in state and national professional organizations. Your fieldwork sites may provide opportunities for students to learn more about leadership in professional organizations, private practice environments, and policy and advocacy organizations. Program outcome measures will evaluate your graduates along measures of leadership in the variety of ways you have identified as important. This identified thread of “leadership” will be reflected in your recruitment materials, in both didactic and experiential portions of the program, and in your outcome measures.

C. Key Questions To Consider

• What do faculty members identify as important characteristics of their graduates?

• What social needs and opportunities are there within the immediate and global context of the institution that these graduates can uniquely meet?
• Do the identified priorities lend themselves to be free-standing threads in a curriculum? Are they sufficiently rich to warrant development across a whole curricular trajectory or should they be combined with another potential thread?

• What knowledge, behaviors, and qualities should the graduates have in order to meet those needs or take full advantage of the opportunities?

• How will the program provide the necessary knowledge and experience for graduates to be able to assume positions in the world that will invite important contributions to the body of professional knowledge?

• How can these threads help create a curriculum sequence that will mesh didactic and experiential content? (See Chapter XI)

• How are the identified “threads” expressed in experiential content such as service learning, and in Level I and Level II fieldwork experiences?

Another example illustrates the importance of themes or threads in a curriculum. A curricular thread or theme may be identified by the faculty as of great importance such as critical thinking and professional reasoning. The faculty would then identify the characteristics associated with critical thinking and professional reasoning that would be emphasized throughout the program, such as (a) communication and the ability to collaborate, (b) knowledge and practice of theory as it informs clinical decision making, (c) understanding the nature of inquiry, and (d) appreciating and generating evidence to inform professional reasoning. Course content and sequencing would offer opportunity for the student to gain knowledge, skills, and experience in the identified characteristics of critical thinking and professional reasoning as the student transitions through the program to practice.

D. Fieldwork Integration
As mentioned earlier, it is essential that curricular threads or themes be extended into fieldwork so that students have multiple opportunities to build experience using the knowledge and skills related to the theme. If a program identifies “community building” as a theme, but then all students complete fieldwork only in hospital settings, there may be a lack of continuity of the theme. That theme can be strengthened by coursework that prepares students to intervene in communities at the institutional level. Such level of intervention requires negotiation and advocacy skills to influence institutional policies and increase community involvement within the institution, for example. A key question to consider while developing curricular threads is, “What fieldwork opportunities and configurations exist, or may be developed, to provide the experiential support for the selected curricular threads?”

For further example, in our earlier discussion we identified recommended core threads such as diversity, globalization, leadership, and the occupational needs of society. We may consider sequencing such core threads through service learning in our own communities; a Level I fieldwork experience to explore policy making in our local and state government, and Level II fieldworks that are of an International nature. Such sequencing accompanied by appropriate course content would support the above-mentioned core threads.

E. Specific Suggestions

Curricular threads or themes are, of course, selected specific to the philosophy of the program and in keeping with the mission and context of the university. The following core curricular threads were mentioned previously as necessary to all occupational therapy programs as they reflect the future vision of AOTA and the profession; some additional elaboration may be helpful as we think of ways to integrate these threads into a curriculum:
• **Critical Thinking/Professional Reasoning.** This may be demonstrated through work that is clearly theory driven; with attention to the occupational therapy process to include the teaching–learning process; emphasis on the person–community–population; and reflection assignments during fieldwork in which students engage in self-assessment of their own professional reasoning.

• **Research and Evidence-Based Practice.** This emphasis or thread may include critiquing, applying, and generating knowledge and evidence for the profession as well as disseminating, and developing tools for practice. During fieldwork, students can identify the research available to support the evidence of interventions, and so on.

• **Diversity/Globalization.** This will require attention to both micro and macro issues and concerns as they relate to the sociopolitical climate to ensure the need for culturally competent care for all populations. Experience with a variety of populations during fieldwork would extend knowledge into practice.

• **Occupational Needs of Society.** We must first encourage awareness of participation/citizenship and occupational justice; followed by practiced actions to ensure inclusion and equity.

• **Leadership.** This thread might include such arenas as advocacy, futurism, entrepreneurship, policy analysis; citizenship and professionalism; communication/collaboration; and professional socialization.

• **Technology.** We would want to include how this thread relates to research, documentation, and tele-health, as well as other developing virtual arenas of interest to occupational therapists.

**G. Connection to Other Sections of the Model Curriculum**
Curricular threads or themes are representative of the AOTA Vision; and mission of the university and the philosophy of the program (see Chapters II and III). They are integral to the curriculum design and the selection of content and methodology. Threads are identifiable in the titles of courses, in their content, in the way courses are sequenced (see Chapter XI), in the experiential and fieldwork portions of the program, and in the lived experience of the student and the graduate.

H. Further Readings and Resources

The following references are recommended as useful resources to develop your thinking with regard to the identified core curricular threads. In addition, they offer general approaches in selecting and developing curricular threads that may be appropriate for your specific program.


VII. Prerequisites

A. General Description of the Importance of the Section

Prerequisite courses are those required of applicants to have been taken prior to entering the program. Prerequisite courses provide the foundational and preparatory information necessary for program courses. Whereas the Accreditation Council for Occupational Therapy Education (ACOTE) has articulated minimal admission standards for entry into an academic program for occupational therapists (2006a, b), each program must carefully identify the interdisciplinary knowledge that will be extended and refined in the program (Wolf & Hughes, 2008). Choosing appropriate prerequisite courses is very important to the success of students and to the program. Prerequisites assure a certain level of knowledge and competence that will free up time in the curriculum to address its own priorities.

B. Resources Needed in Order To Answer Key Questions

- Program mission, philosophy, and vision statements
- Curriculum themes/threads developed after considering institutional context and mission, as well as the program’s mission, philosophy, and vision
- ACOTE standards applicable to the program level (e.g., master’s or doctoral)
- Knowledge of courses offered at the institution and other local colleges/universities or “feeder” institutions
- Occupational therapy curriculum and courses, if already established and in process of revision
- Recognition of prerequisite knowledge for courses in the curriculum
- Examples of prerequisites from similar-level occupational therapy programs at other institutions

C. Key Questions To Consider
• What is the purpose of prerequisites for this program? Are they to provide broad, interdisciplinary background knowledge for specific courses, set standards for admitting high-quality students, or both?

• How do the prerequisites integrate with your curricular plan and are they mapped into the curricular design? Do they complement the curricular threads (see Chapter VI)? For example, a program that has decided that, in addition to preparing its graduates as generalists, will have a thread of upper-extremity function as a focus. Such a program might want to require more anatomy and physics courses as prerequisites. As another example, a program that has committed to a community-development thread may want to emphasize sociology, organizational psychology, or anthropology in its prerequisites.

• How many prerequisites should be required? How many are too many? What is the ideal balance between maintaining the program as a competitive choice and requiring enough prerequisites in order for students to succeed in a program with a unique focus?

• Are the types of courses you want as prerequisites reasonably available in your own institution and in your feeder schools? For example, you may wish to require medical terminology as a prerequisite that would support most of your courses. However, if it is not offered in your institution or in most of your feeder schools, you may inadvertently reduce your applicant pool. Further, you may be forcing students from your institution to transfer to another institution in order to complete prerequisites and be ready to apply for admission in the program.
• Will the number of prerequisites be a barrier for applicants? To what degree will the prerequisites set and maintain a desired standard for admission for students those entering the program and the profession?

• How often should you review the prerequisites for your program? Evaluation of the effectiveness of prerequisites should be part of the overall program assessment plan (see Chapter XII of this Guide).

• How many courses in the program actually need prerequisites, and why? Prerequisites should be explicitly linked to courses in the curriculum so that both faculty and students have an understanding of the global picture of the curriculum.

• If the number of prerequisites or their availability seems to be a barrier for too many applicants, consider whether particular prerequisites should be brought into the occupational therapy curriculum. For example, if a prerequisite course of medical terminology is not available at your own institution or at your feeder schools, you may need to offer such a course as part of the early sequence within the occupational therapy curriculum.

• Which ACOTE standards are being met by the prerequisite courses?

• What will you determine to be the acceptable grade for these prerequisite courses? Admission standards to the program must be somewhat consistent with the practice of other programs in your institution. For example, some programs may have an overall cumulative grade point average of 3.0 (on a 4-point scale) as a prerequisite and not consider grades in individual prerequisite courses as long as the applicant has passed them. Other programs may require a grade of C or better in all prerequisite courses.

• What is an acceptable source and level for prerequisite courses? Is it acceptable for these courses to have been completed at a community college? Should they have been completed at
a 4-year institution? Should they be “upper division”? Will you accept distance-format courses? Can students waive the requirement through the College-Level Examination Program (CLEP) or any other exam?

- Who else could you consult with to determine prerequisite courses? The Registrar at your institution? Other program directors?

- Can you identify a range of examples of courses that could satisfy your prerequisite? Do you give multiple examples of the types of courses that could satisfy a prerequisite? For example, if you require an “upper-level life science” course as a prerequisite, you may want to list the courses in your institution that would fulfill that requirement.

- Have you helped the admission staff at your institution understand the rationale for the prerequisites? Are they able to help applicants understand the value of these prerequisites? Can they connect them with the courses in the curriculum?

- How long ago can prerequisite courses have been completed? If part of your mission is to serve nontraditional or second-career students, you may need to review how much knowledge in a particular discipline has changed in the past 5 years or so, to determine whether your students will be sufficiently up-to-date to succeed in your program.

- Should you offer proficiency exams to be passed that are the equivalent of a prerequisite? This may be a useful strategy if you find too wide a variety of levels of courses taught at different institutions. For example, other institutions may offer medical terminology courses, but not cover enough information to meet your program’s needs. Similarly, you may consider a proficiency examination to evaluate students’ computer or language skills.

D. Fieldwork Integration
Conventional wisdom suggests that applicants that have had the opportunity to observe occupational therapy services being delivered may have a clearer idea of what the profession entails than those applicants who do not. Some occupational therapy academic programs require a certain number of hours of observation in a clinical occupational therapy program or of volunteering at a community organization. Other occupational therapy programs build in such experiences in the first semester to help students be certain of their career selection. As with other prerequisites, this should be considered in light of your program’s philosophy and mission. For example, if your program is committed to developing professionals to work in nontraditional practice, a requirement to observe in an acute care or in-patient rehabilitation hospital may not provide the applicant with much insight into the mission of your program.

E. Specific Suggestions

- Be clear about why you are requiring each prerequisite course so you can easily explain it to students, admission personnel, academic advisors, registrars, and accreditors.
- Clearly identify prerequisite courses and/or tests in all catalogs, program brochures, and Web sites, and list the required grade for acceptance. For example, if you accept a letter grade of “B” but not a “B−,” list the accepted grade as a “3.0 in a 4-point scale.”
- Consult your registrar’s office about possible prerequisites for the occupational therapy program. Some desired courses may be open only to students in a particular major, and you will need to negotiate for “pre-OT” students to be permitted to enroll.
- Map the use of prerequisite knowledge in the curriculum.
- Make clear to the students when you expect them to use and build on knowledge from a prerequisite course.

F. Connection to Other Sections of the Model Curriculum
• Prerequisites should be consistent with your institution’s context and mission (Chapter I).

• Prerequisite courses should be considered part of the meta curriculum that prepares students to meet the program’s and profession’s vision (Chapters II and III).

• Prerequisites should be represented implicitly in the graphic design of the curriculum (Chapter V) and correlate to curriculum threads (Chapter VI). For obvious reasons, individual prerequisites cannot be represented in the graphic curriculum design. An overload of details in the design would render it too complex and, therefore, not useful as a summary of the curriculum.

• Prerequisites should support the content of the curriculum (Chapter VIII) and be considered in the overall program assessment plan (Chapter XII).

G. Further Readings and Resources

Obtain and review course catalogs or online resources from local institutions and feeder schools to your program. In addition, you may wish to consult the following resources:


VIII. Content

A. General Description of the Importance of the Section

The content of the curriculum includes the courses that are offered, objectives for each course, topics being covered (breadth and depth), readings, and other resources needed for courses, as well as the evaluation strategies used to assess students’ knowledge. Curricular content may also include opportunities outside the classroom, such as public lectures, volunteer experiences, health fairs, service trips, and so on. In occupational therapy education, fieldwork is also an essential part of the curriculum.

The mission and philosophy of the program—as well as the philosophical frame for learning, the curriculum design, trends of the profession, context of the university, accreditation requirements, and many other factors—influence the development of curricular content. Curricular content defines the uniqueness of the program and is directly connected to student outcomes. Therefore, the content of a curriculum must be developed with intentionality, careful consideration of the integration of the knowledge with experience, and an eye to the future of the profession. It is important to note that not every program will have the same content because of the unique interactions between its history, location, faculty, and students.

Curricular content should be planned so that courses are integrated throughout the curriculum, which means that there is a coherent link between all the courses taken within a semester or academic term, as well as between terms. This link is sometimes referred to as vertical and horizontal integration across the curriculum (Fink, 2003). Integration means that courses complement each other, reinforcing concepts learned earlier, and drawing from each other. On occasion, courses need to overlap in content to offer additional opportunities for knowledge to be reinforced or expanded.
In addition to having intentional links with other courses in the curriculum, each course should have an internal organization that is coherent. A course can be considered “a curriculum within a curriculum” (Weimer, 2002). In the same way that a curriculum is designed by first considering the mission and context of the university, profession, and program in order to identify the desired student outcomes, so too a course is designed by first considering its place in the curriculum and how it can contribute to the achievement of the overall desired student outcomes. Course learning objectives are carefully designed in relation to the program objectives and program’s philosophical frame for learning, and course content is laid out in a sequence that gradually builds on skills and knowledge. Learning strategies (see Chapter IX) are selected in relation to the kind of knowledge and skill covered in the course.

Each program will have what is called explicit, implicit, and null curricula (Eisner, 2001). The explicit curriculum refers to all the knowledge or course content and activities that are officially named and given attention to throughout a program of studies.

The implicit curriculum, on the other hand, is what is actually taught in a program “because of the kind of place it is” (Eisner, 2001, p. 96), including the physical characteristics of the classrooms, the routines of a course, the reward systems used, and so on. Eisner (2001) argued that the implicit curriculum is actually the largest and most influential part of a curriculum because it gives the context to the real learning that takes place in a program. For example, a lecture hall with desks and chairs that are fixed can send the message that students are passive receptors of knowledge or that the knowledge covered in the course only requires to be heard in order to be learned. Similarly, sterile classrooms with furniture that is uncomfortable yet easy to maintain may send the message that efficiency is more valued than creating an environment that sustains learning and creativity. An instructor who is chronically late to class
sends the message that students’ time is not as valuable as his or hers. An instructor who keeps his or her office door open and has welcoming signs sends an implied invitation to students to discuss ideas and concerns. These examples of implicit curriculum “express the values we cherish, and, once built, they reinforce those values” (Eisner, 2001, p. 97).

The null curriculum supports the implicit curriculum and refers to the content that faculty members choose to leave out and, therefore, that students will not learn in a particular program. The null curriculum is content that students may interpret as unimportant or may never even consider. Eisner (2001) wrote that

“... what schools do not teach may be as important as what they do teach. Ignorance is not simply a neutral void; it has important effects on the kinds of options one is able to consider, the alternatives that one can examine, and the perspectives from which one can view a situation or problems. The absence of a set of considerations or perspectives or the inability to use certain processes for appraising a context biases the evidence one is able to take into account.” (pp. 98–99)

The implicit and null curricula illustrate why it is so important that careful consideration be given to the content of a curriculum, and why that “content” is much more than the declarative knowledge students may acquire. Depending on what teachers model, students learn to process information in particular ways and not in others. They learn when and when not to ask questions and how to act attentive. They may imitate their teachers’ attitudes. They learn about respect for others from the teachers’ own demonstration of respect or lack thereof. Thus, the learned curriculum is much more inclusive than the overtly taught curriculum.

B. Resources Needed in Order To Answer Key Questions

- Program mission statement
• Program philosophical frame for learning/pedagogical beliefs
• Curriculum design
• Curriculum themes or threads
• Assessment of context of university, state, and community
• Books and A-V suppliers
• Access to databases, Internet
• Professional resources (i.e., AOTA practice guidelines, journals and other publications, AOTA Centennial Vision statement, code of ethics, anticipated trends, and so on)
• Information on societal needs (i.e., latest updates on political climate, census data, health disparities information, community resources, and so on)
• Accreditation standards and other related information (i.e., past accreditation self-study reports, guides for reporting, and so on)

C. Key Questions To Consider

• What content areas do your curricular threads and abilities-based outcomes lead you to include, emphasize, and exclude?
• What content requirements are articulated in the regional and specialized accreditation standards to which the program must respond?
• How should the context of the college and/or the community influence what content is taught? What content opportunities are available given faculty relationships with the local community?
• How can you best document the reasoning process for including or excluding content and determining level and depth of that content? Is that reasoning process based on the curriculum design, threads, philosophical frame for learning, entry-level practice?
• If service-learning or other kinds of community interaction are part of the content delivery, what agencies and resources in the community need to be contacted? Who administers this, the support staff or faculty?

Example:

A Jesuit College might require a service component as part of the curricular content. How will you take this opportunity and incorporate it into your curriculum? How will you put an “OT stamp” on this experience so that it is different from what is expected for the rest of the student body? As you set up the OT objectives for the experience, how will this be different from Fieldwork I? Usually, there are no occupational therapy practitioners working in the type of settings where service-learning takes place. How will you help students frame OT needs, propose OT roles, think about community-based OT services? If the community has a large population of people over the age of 65, a thread in the curriculum may focus on the occupational needs of the elderly. One learning strategy may be to have students do a service-learning project with the local Elder Care organization that might assess the occupational needs of elders in several assisted-living facilities in the community.

Urban campuses are often adjacent to large populations of persons who are homeless. Whether the venue is service learning, fieldwork, or course-related practice experiences, the curriculum content will address the knowledge and skills needed to best prepare the student for an occupation-centered experience with this population.
• Should the program focus on any particular practice emphasis of the AOTA Centennial Vision statement or should each of the following areas be addressed in a minimal fashion?
  o Children and Youth
  o Productive Aging
  o Mental Health
  o Health and Wellness
  o Work and Industry
  o Rehabilitation, Disability, and Participation

• How will the curricular themes be woven into the content and in which courses or modules should they appear?

• Does the content meet the requirements of the ACOTE standards? Are there opportunities to exceed ACOTE standards given the resources that are available?

• How can the environment and routines of the program support the content of the curriculum? What implicit messages in the environment need to be identified and changed? Which should be made explicit in the curriculum?

D. Fieldwork Integration

Fieldwork experiences must be consistent with the curriculum design and well integrated into the overall curriculum. Didactic and fieldwork or experiential learning must complement each other. Therefore, when considering what content should be included in the curriculum, it will be important to consider the following issues:

• Are fieldwork settings available in the community that can readily link with curricular content and curricular threads?
• What content is best learned in a didactic or classroom setting and which in an experiential setting?

• It will be very important for fieldwork sites to be knowledgeable of the curricular content so they can reinforce and extend learning. How can you achieve this? Through workshops, materials sent in each fieldwork packet, individual meetings with the clinical fieldwork educators?

• It will also be important for the program to understand the trends and expectations from the field. How can programs gather that information? Should a fieldwork advisory group be constituted? Should focus groups in the community be conducted?

• How will you assure that there is collaboration between the program and fieldwork site that will help shape the curricular content?

• Will issues such as “bridging the gap” between classroom content and practice be part of the content?

• What content do students need to learn in order to be prepared to work in sites that may not practice in the way they have learned?

• What are the consistencies and variations in fieldwork sites that will influence the extent to which classroom content can and will be reinforced? What are the implications of fieldwork variability for students’ abilities to master some content areas?

E. Specific Suggestions

• Make a list of content areas that your research leads you to include, emphasize, and exclude.

• Remember that the content should be evaluated on a regular basis to assure that it is addressing all of the suggestions made earlier. Ideally, an annual review can serve to continually keep the curriculum updated.
• Examine the contents and sequencing of content of other programs that share a similar philosophy to get ideas.

• Consider the level of expertise that students need to attain with the content over the course of the program (e.g., exposure, simulation, real experience) and how the expected level of expertise will influence content delivery.

F. Connection to Other Sections of the Model Curriculum

• The context of institution and community (Chapter I) provides resources and opportunities for learning that should direct what content is included in the curriculum.

• The philosophy of the profession, AOTA’s Centennial Vision, and trends that occupational therapy scholars have identified (Chapter II), as well as the program’s own philosophy and mission (Chapter III), guide the desired outcomes and, therefore, the content of a curriculum.

• The philosophical frame for learning (Chapter IV) will guide how content of the curriculum should follow along selected curricular threads (Chapter VI).

• Prerequisites (Chapter VII) will also inform how content is taught (Chapter IX), how it is sequenced (Chapter XI), and the resources needed to teach it (Chapter X).

• Abilities-based outcomes (Chapter XII) must be achieved through learning of the curricular content.

G. References and Further Readings and Resources

References


**Further Readings and Resources**


IX. Learning Strategies

A. General Description of the Importance of the Section

Learning strategies directly result from the educational philosophy of the program (see Chapter III) and are a major influence on student learning. They are defined as behaviors and thoughts in which a learner engages and which are intended to influence the learner’s encoding process (Gentner, Loewenstein, & Thompson, 2003; Weinstein & Mayer, 1983). Additionally, they affect the way in which the learner selects, acquires, organizes, or integrates new knowledge. Learning strategies reflect the philosophy for learning adopted by the program, and guide students toward the students’ abilities-based outcomes (refer to Chapter IV). Learning strategies should challenge students by requiring reflective critical thinking. They should culminate in the application of effective problem solving to resolve a professional practice problem, and as such, should be carefully designed.

Faculty members design learning strategies that reflect the uniqueness of the academic program and their own educational philosophy. The strategies are designed to “fit” the content being taught and may address students’ learning styles. Grasha (1996) identified clusters of teaching styles with associated learning styles and learning experiences, which may support faculty in determining learning strategies for their students. Two of these clusters identify the primary learning style of the students as “Collaborative/Participant/Independent,” which seems appropriate for occupational therapy students. According to Grasha and Yangarber-Hicks (2000), learning activities that encourage collaboration, participation, and independent thought include case studies, research projects, problem-based learning assignments, small-group discussions, role playing and simulations, and activities in which students learn information and then teach their peers. These learning strategies essentially incorporate activities that reflect a more active
approach that focuses on experiential tasks and reflection (Richlin, 2006), which some programs may prefer. Other programs may choose alternative approaches to learning that more closely reflect their own philosophy.

B. **Resources Needed in Order To Answer Key Questions**

Many occupational therapy faculties are not trained to be educators, but desire to provide excellent learning experiences for their students. Multiple resources such as those discussed below, as well as others that may be available within your own institutions, will be useful to develop the knowledge and skills necessary for effective teaching.

- The program philosophy and philosophical frame for learning (see Chapters III and IV) provide the framework for the development of learning strategies by determining whether the program is based on adult educational principles, experiential learning approaches such as problem-based learning, competency-based education, a community service–centered and service-learning approach, or any of several other approaches to learning.

- Additionally, the program’s abilities-based learning outcomes (see Chapter IV) guide the development of student learning activities. For example, if one outcome states that students will be skilled communicators within verbal, written, and technology realms, the faculty should develop multiple learning opportunities for students to experience and practice these skills. *Course objectives* will provide similar guidance.

- For broader guidelines and information, the faculty member can turn to the numerous published resources about learning theory and various teaching/learning strategies. If it seems unclear where to begin, approach the education department in your institution or your librarian for guidance. Other resources include people within your own program. Developing study groups where various pedagogical approaches are discussed, using readings or
classroom experiences, is an excellent way to answer your own questions about how to develop the most effecting learning strategies for your students.

C. Key Questions To Consider

As faculties begin to plan learning strategies and activities for their students, they may want to consider the following questions:

**Determination of Learning Strategies**

- Given the program’s philosophical frame for learning, what are the usual teaching/learning strategies that best match this philosophy? For example, if your institution utilizes a competency-based curriculum, using lectures supported by lab experiences may best meet your requirements. These approaches may best be assessed using written and practical exam formats. Another institution may choose a student-centered approach to learning and use the strategies of small-group discussions, library research, and class presentations to address the information presented in texts or classroom. In this case, student learning may be evaluated through reflective journals, integrated papers, or quality of presentations.

- What set of learning formats and pedagogical approaches (e.g., problem-based learning, online learning, hybrid learning strategies, service learning, lecture, discussion, and so on) is most suited to the abilities-based outcomes? For example, if one of the outcomes is to develop leadership skills, instructors may choose to include community service-learning projects to meet this goal, have students teach their peers about certain information or skills, or encourage students to take a leadership role in the state occupational therapy association or the student occupational therapy association.

- What will be the balance of in-class learning versus out-of-class learning? If students are expected to do much database research for evidence to support classroom theory, then time
has to be allotted and strategies to report on that information must be identified. Additionally, if a course incorporates a service-learning project, how will the time and experience outside of class be incorporated into the classroom?

- Learner characteristics must be carefully considered. Younger students use technology to learn, exchange information, and connect with each other in unprecedented ways. Learning strategies for a “virtual world” should be evaluated often.

**Faculty Needs**

- Are the faculty familiar with and do they agree with the pedagogical assumptions in the educational philosophy? Are they skilled in developing the teaching/learning strategies inherent in this philosophy? If not, will there be sufficient development time to support faculty in the development of these learning strategies?

- Have the faculty considered teaching/learning strategies for a virtual classroom? Are they prepared to include information technology in the learning experiences to enhance and maximize them?

- Can each faculty member describe the rationale behind the learning strategies used? If not, he or she may not have enough understanding to effectively use these strategies.

**Resource Needs**

- Does the program have the budget, equipment, space, and time within its curriculum to develop and implement these learning strategies? For example, problem-based learning requires small-group rooms, excellent library resources, and a small faculty-to-student ratio, which can be expensive. All of these factors must be taken into account before determining to use this teaching strategy.
• Are the information technology resources up-to-date? Will they be sufficient to engage students?

Assessment

• How do the teaching/learning strategies meet the needs of the particular types of students enrolled in the program? For example, if you have many older adults or returning students, are the teaching/learning strategies flexible enough to meet their learning needs and in keeping with the mission of the program/admission policies and recruitment strategies?
• How do the learning strategies meet the goals and outcomes of the curriculum?
• How will the effectiveness of the learning strategies be measured?

D. Fieldwork Integration

A major concern of many occupational therapy educators is how to bridge the potential academia–fieldwork gap. Developing learning strategies to specifically address this is one response. Within the academic portion of the program, faculty might consider developing experiential lessons (such as role-play, panels, interviews) that develop interaction skills between students and fieldwork supervisors. Reflection sessions, after Level I fieldwork visits, that focus on problem solving can help. Programs might also consider continuing to support students who are on fieldwork by developing online strategies such as chat rooms on Blackboard or other programs. A few academic programs have found this helpful to dispel the disillusionment felt by some students who are faced with supervisors who may not be as occupation-based as the curriculum has emphasized they should be.

An additional consideration is the need to carefully strategize the best approach to communicate the program’s teaching philosophy and approach to learning to the clinical fieldwork educators. Although most programs send out written documentation to their fieldwork
sites, there may be more effective learning activities and strategies that may better accomplish this goal.

E. Specific Suggestions

• Read the literature that supports your learning philosophy and identify the learning strategies suggested. Have faculty share successful learning strategies and brainstorm additional approaches to deliver content and information that are consistent with the abilities-based outcomes and content objectives. This is often successfully accomplished through ongoing study groups, or regular curriculum or pedagogy meetings.

• Use your university’s teaching and learning center for information and support, and survey other programs and faculty in your institution to learn what teaching and learning strategies are used.

• Determine which strategies are effective for delivering your curriculum, given the type of students whom you are admitting. For example, if most of your students are adult learners, examine the adult-learning literature for specific strategies. Explore the evidence on effective learning strategies. For example, PowerPoint presentations are believed to induce passive learning if overused, and lecturing has been found to be the least effective learning strategy for retention (Bligh, 2000). Conversely, discussion-based strategies have been found to teach problem solving, original thinking, decision-making, attitude change, and interpersonal skills (Bligh, 1999).

• Use senior faculty to mentor new and adjunct faculty, or community practitioners who may have a teaching role in your program. You might also institute a peer-teaching review process to ensure that learning strategies and the messages they convey to students are consistent across the curriculum.
Develop information technology at the same time that learning strategies are being designed. Information technology can serve to enhance and maximize learning, and sometimes the virtual classroom can be more effective than limiting learning to a specific hour of the day when a course meets in the classroom. Explore the options available on your campus, as well as those that other programs use.

Lastly, but very importantly, assess the effectiveness of various strategies. You can do this by surveying students regarding which strategies they learn from the most. Additionally, at the end of each lab or learning experience, you could build in time to ask for student feedback about which aspects were effective for their learning. You can also use objective measures (test results, other evaluative methods, analysis of NBCOT exam results) to evaluate results. There is an exciting body of literature about the scholarship of teaching and learning that could also support you in this effort.

F. Connection to Other Sections of the Model Curriculum

- Determine how your learning strategies reflect the context of the community, institution, and program (see Chapter I).
- Determine the degree to which your learning strategies reflect the vision and trends of the profession (see Chapter II).
- Determine the degree to which your learning strategies reflect the espoused philosophical frame for learning of the program and faculty (see Chapter IV).
- Determine the degree to which your learning strategies result in the expected abilities-based outcomes (see Chapter IV).
• Determine how the learning strategies support and carry the curricular threads (see Chapter VI).

• Identify the resources needed to successfully implement learning strategies that match the content (see Chapters VIII and X).

G. References and Further Readings and Resources (Bibliography)

References

Gentner, D., Loewenstein, L., & Thompson, L. (2003). Learning and transfer: A general role for analogical encoding. *Journal of Educational Psychology, 95*, 393–408.


Readings and Resources


X. Resources

A. General Description of the Importance of the Section

A curriculum must have significant resources in order to be delivered in an effective manner. These resources include not only adequate budgets, but also classroom and lab spaces that meet the program’s educational philosophy, lab equipment and educational materials, sufficient library holdings and database access, access to technology, excellent fieldwork settings, sufficient faculty and staff to support the program, and an experienced program director.

How does a program make decisions about needed resources in order to implement the program that has been designed? This aspect of curriculum development must be as intentionally determined as the preceding sections.

B. Resources Needed in Order To Answer Key Questions

Exploring and providing adequate resources to support an occupational therapy curriculum may feel overwhelming, but is necessary in your planning. Although many people believe that a curriculum consists of only courses and teaching/learning strategies, the resources identified in this section provide the scaffolding on which the curriculum can be built. Knowing where to look for answers and resources is the job of the program director and may include the following:

- Knowledge of the program’s available budget
- Access to the dean, provost, or chief academic officer, and the financial coordinator of your unit
- Working relationship with the instructional technology staff and an understanding of the available instructional technology
- Floor plans of the available space and an effective working relationship with the facilities management director and staff
• Lists of library resources and an effective working relationship with the university librarians
• Program philosophical frame for learning
• Curriculum design, content, sequence, and outcomes
• Furniture and equipment catalogs

C. Key Questions To Consider

Space and Furnishings

• How does the program’s teaching/learning philosophy influence the kind of space and furniture needed? For example, a student-centered philosophy would require space for small group as well as large-group work, and flexible furniture settings. The way courses are taught and the number of students will determine the need for lab space. The number of hours per day that students spend in the main classrooms will influence the type of chairs and tables to purchase. Will classrooms be arranged in lecture style, or in a circle, square, or U-shape to accommodate increased interaction?

• How does course content influence equipment and storage needs? For example, if the program has a significant focus on a sensory-processing framework is the room adequately designed to support hanging apparatus and is there sufficient space to store large equipment? Is there sufficient storage space for fieldwork files and secure student files? Is there storage space or lockers for students’ coats and other paraphernalia near the classrooms and labs in order to keep their learning environments uncluttered?

• Is there adequate office space for faculty? Will the space permit private counseling of students?

Support Staff and Faculty
• How can the program work collaboratively with the librarians to educate them regarding curricular needs? If you are focusing on evidence-based learning, do the library holdings and databases currently provide the support needed? Plan to communicate with the librarians regularly to update them on curriculum foci and threads, as well as research interests of the faculty and students.

• Does the program have enough full-time and part-time faculty to provide special learning strategies such as problem-based learning or service-learning projects, or multiple sections to support small labs if the curriculum requires them? Does the institution support team teaching? What is the required faculty-to-student ratio and does it differ from the necessary faculty-to-student ratio to accomplish the learning strategies used in your program? Is there sufficient staff support for academic and fieldwork requirements?

• Will students be working with research faculty to support their projects? If so, will this require additional lab space, materials, funding, faculty time?

**Nontraditional Learning Experiences**

• Does the infrastructure and philosophy of the institution support online courses? Will instructional technology be available to enhance classroom education? Is distance education a realistic option? Develop an effective working relationship with the IT staff and director.

• Will the program be engaged in service-learning or other community programming? Is there financial and personnel support for this approach?

• What instructional technology can enhance the learning experiences? The generation entering college is more comfortable using technology to share information and remain connected with peers. Are there ways to take advantage of this familiarity with technology to maximize learning?
Financial Support

- What is the financial climate of the institution? Will the occupational therapy program have its own budget? Where does the budget come from; tuition, other university funding, state monies, other? Is the program expected to raise funds through grants? How much funding is needed for faculty development, fieldwork travel, special projects that help make your program unique, or support for doctoral education?

D. Fieldwork Integration

Providing excellent fieldwork sites that support the program’s philosophy and curriculum is challenging, yet vital. Good fieldwork sites are some of the most important resources for achieving student outcomes. Some important questions and considerations about fieldwork include the following:

- Does the program have sufficient fieldwork sites in all areas, including mental health, for both Level I and Level II experiences? If nontraditional fieldwork sites are available, is sufficient supervision available? Will supervision be provided from program faculty, clinical staff, or others?
- Is there sufficient staff support for fieldwork processes?
- Is the university counsel accessible for contract questions? Who handles these issues—the academic fieldwork coordinator? Staff? Business office? Other? Does your institution have a centralized experiential education office where fieldwork experiences for all programs are handled? Does your fieldwork coordinator have sufficient access to that person or office?

E. Specific Suggestions

Financial
• The program director, or designee, must be skilled in financial management in order to effectively work with the budget to support the program. The program director or designee should communicate regularly with the dean, provost, and financial coordinator regarding the program’s budgetary needs as well as the financial climate of the institution. Spend money wisely, with an eye to the future.

• The program director or designee should share budget information with faculty as necessary in order to keep them involved with program and curriculum planning and needs.

**Space and Facilities**

• A member of the occupational therapy faculty or staff must be on the building committee or have significant input to the plans if there are renovations, or when building a new occupational therapy space.

• Plan annual faculty meetings to review the needs of teaching and lab space, equipment, and supplies, based on pedagogical philosophy and curricular content.

• Develop a working inventory for occupational therapy classroom, labs, and storage space, and develop policies to help maintain the inventory.

**Staff and Faculty**

• Develop effective working relationships with all support staff to the program, including the IT director, the librarian, the facilities management staff, and the administrative office staff.

• The program director must have regular and ongoing meetings with individual faculty, providing support and mentoring as needed.

• The program director must advocate for faculty and staff, to the dean and provost, in order to help meet their requirements and needs.
• Develop training workshops and materials for fieldwork supervisors to keep them apprised of the program philosophy and curriculum.

D. Connection to Other Sections of the Model Curriculum

The most obvious connection to resources is the program educational philosophy (Chapter III) and curricular design (Chapter V), which of course are related to all other areas. Other connections include the context of the university in regard to budgetary support (Chapter I), which in turn affects most available resources. Additionally, the resources available will have an impact on the entire curriculum development and determine the success in students’ abilities to reach the identified outcomes (Chapters IV and XII).

H. Further Readings and Resources (Bibliography)


XI. Sequence

A. General Description of the Importance of the Section

The sequence of a curriculum refers to the flow of the content within and across courses and fieldwork in a given semester, as well as across the program as a whole. Through careful sequencing, students can develop knowledge, skills, and attitudes that build on each other and become more refined over time. Sequencing decisions must be based on a clearly articulated rationale that is conceptually congruent with the program’s philosophy of learning, the curriculum design, learning strategies, and its stated outcomes. Each sequencing decision should be evaluated for its consistency with this rationale. In addition, sequence of a curriculum must complement and support the curricular content so that students can and will achieve the expected outcomes.

At the core of curriculum sequencing decisions is how to best progress a student in a given skill or content area. Sequencing must take into account required courses, elective courses, and fieldwork. For example, to develop students’ therapeutic use of self, a faculty may decide to begin in the first semester with a required course that introduces key concepts and how they are applied in occupational therapy practice. Students may practice these skills through role-playing with each other and by having opportunities to observe clinicians apply these skills with clients during observational experiences or use of videotapes in the classroom. Key concepts related to therapeutic use of self may be reinforced in other first-semester courses focused on occupational therapy theory or conducting occupation-based assessments. In subsequent semesters, students may have additional required experiences in actual practice settings, during which they can apply the knowledge and skills they previously learned in the first semester through readings, role-
playing, and discussion. Later, their knowledge and skills can be further refined during fieldwork. An elective course on advanced therapeutic use of self may be offered near the end of the program. At each point, students are reminded about the key concepts, provided feedback on their performance and application of them, and given an opportunity to refine their skills through increasingly challenging situations. Similar examples could be developed for any thread in an occupational therapy curriculum—task analysis, note writing, or use of research in practice.

B. **Resources Needed in Order To Answer Key Questions**

To make sequencing decisions for a curriculum, several key questions must be asked. These questions are listed in Section C, below. The resources needed to answer these questions are as follows:

- Program philosophy and mission
- Philosophical frame of learning
- List of abilities-based outcomes expected upon completion of the curriculum and how they will be evaluated
- Curriculum themes/threads
- List of prerequisite courses within the curriculum,
- Information about curriculum completion options, if they exist (e.g., full-time, part-time)
- List of educational resources by semester (e.g., fieldwork sites, faculty time)
- University calendar (start/end dates for semesters or quarters and grade submissions)
- List of content that needs to be covered over the duration of the program and the relationships across and within content areas
• Knowledge of how information about courses and their content are shared, or could be shared, across members of the faculty in order to maximize learning between and across courses over time

• Accreditation Council for Occupational Therapy Education (ACOTE, 2006a, 2006b) standards and National Board for Certification of Occupational Therapy (NBCOT) requirements for exam eligibility (e.g., hours of fieldwork), which provide guidance of the minimum expectation for academic programs

Examples of how these resources can be used during the process of sequencing a curriculum are provided in the following sections.

C. **Key Questions To Consider**

With the resources at hand, the following questions can be used to inform and guide decisions about curriculum sequencing:

• What is the philosophical and theoretical foundation of the curriculum? What does this foundation mean for how content should be introduced and progressed over time? For example, if a faculty in a research-intensive university has decided to use social learning theory as one of its primary philosophical frames for learning, exposure to and engagement with faculty-led research projects could be included in the curriculum sequence to support and advance students’ research skills after they have completed the required research coursework.

• What are the key threads in the curriculum and how are they related to each other within and across semesters? What role do prerequisite courses play in content sequencing? What content cannot be covered without prerequisite knowledge? How long can the faculty reasonably expect students to retain prerequisite knowledge and what influence might this time frame have on the sequencing within a curriculum? How does faculty explicitly draw on prerequisite
and undergraduate knowledge, particularly in the first semester, to demonstrate its relevance? For example, an occupational therapy program may have cultural competence and addressing health disparities as two of its major curricular threads. To prepare for the curriculum, introductory coursework in anthropology and public health can serve as undergraduate prerequisites to introduce students to basic concepts relevant to these threads. These concepts can then be addressed, refined, integrated, and applied to specific practice contexts throughout the occupational therapy curriculum.

- What abilities-based outcomes are expected on completion of the curriculum? What competencies do students need to master to eventually achieve these expected outcomes? How can students be scaffolded across the curriculum to achieve these outcomes? How can competency be ensured before a student progresses to the next level or course in a given area? For example, one of the ACOTE standards is that students must be able to plan and lead therapeutic groups (B.5.6 [ACOTE, 2006a, 2006b]). A faculty that has selected problem-based learning as its philosophical frame for learning may decide to engage students in planning and leading therapeutic groups very early in the curriculum, building the complexity of the groups and clients over time, so that when students are on fieldwork, they will have the required competencies to meet this accreditation standard.

- What are the practical constraints that faculty must address in order to achieve desired sequencing (e.g., length of program, faculty time, resources within semesters)? How can faculty communication be maximized to promote integration of material across individual courses and the curriculum as a whole (e.g., some redundancy with some new content, joint projects, different parts of one project)? Are there any semesters where adjuncts, fieldwork sites and/or faculty are more difficult to obtain? If yes, might that influence sequencing? For
example, the occupational therapy program might share standardized patients and space for practice labs with physical therapy and medicine. Availability of these resources may necessitate that certain practice labs must be done earlier in an individual course than the faculty might like. Consequently, some of the initial preparatory knowledge that students need for successful participation in the labs may need to be covered in other courses in previous semesters.

D. Fieldwork Integration

Fieldwork is a critical component for any occupational therapy curriculum, representing an opportunity for students to integrate and apply the knowledge, skills, and attitudes that they have developed in the classroom in a real-life practice context. The critical nature of fieldwork within an occupational therapy curriculum means that decisions about when it occurs within the sequence of required and elective courses must be considered carefully. Again, returning to the program’s philosophical frame of learning can be helpful to inform these decisions.

- What do the program philosophy and guiding learning theories suggest about the timing of Level I fieldwork? For example, do they support fieldwork as early as possible to obtain a real-life experience on which the students can later reflect, or do they support a longer period of formal education first in order to fully benefit from the Level I experience?

- What does the program philosophy and guiding learning theories suggest about Level II fieldwork, its objectives, and the need for a debriefing after it is completed? Does your program’s philosophical frame of learning support having students return to the classroom after Level II to reflect on and process their experiences or is this step not necessary in your curriculum sequence?
• What does your program’s philosophical frame of learning and curriculum design say about using fieldwork to generate topics and issues for classroom assignments? How might this influence sequencing?
• What role does the faculty have during fieldwork for helping students to process their experiences, and reflect on and integrate their developing knowledge? If so, what are the options to achieve this integration (e.g., online discussion boards or other electronic methods)?

E. Specific Suggestions

Once the faculty have debated and discussed the key questions and issues related to fieldwork, it is time to begin the process of curriculum sequencing. A recommended process is as follows:

1. Start with the curriculum threads and the abilities-based outcomes related to these threads. Conduct an analysis to identify all of the steps that students will need to progress through to master the threads and successfully achieve the expected outcomes. Translate these steps into a sequence that can be implemented given the practical constraints within which the faculty must work.

2. Take the list of content areas that must be covered in the curriculum, given the accreditation standards and the program mission. Based on the program’s philosophical frame of learning, identify the logical progression of content. In other words, identify what makes the most sense for students to learn first, second, third, and last in each content area. Consider whether there are overlaps in some content areas, and how these overlaps may influence timing of specific materials relative to each other.
3. Examine ways to link the threads/outcomes sequence and the content sequence together through specific courses, the content covered in those courses, assignments, and other evaluation methods. Consider the links between the two sequences, given the resources that have been reviewed and the key questions that have been answered.

4. Finally, identify how new faculty members and adjunct instructors will be indoctrinated into the curriculum sequencing so that they can contribute to it and ensure that it works as intended. Identify ways to evaluate the curriculum sequence on an ongoing basis to ensure that it makes sense to faculty involved in teaching, adjuncts, and students, and can be adjusted if necessary.

F. Connection to Other Sections of the Model Curriculum

Sequencing is influenced by all of the initial decisions made during curriculum design (philosophy, learning theories, outcomes) and needs to be considered during curriculum evaluation.

G. References, Further Readings, and Resources (Bibliography)

References


Further Readings and Resources


XII. Outcomes Assessment

A. General Description of the Importance of the Section

Outcome measurement is a systematic way to assess the extent to which a program has achieved its intended results. Occupational therapy programs and accrediting bodies look for demonstration of how graduates improved their knowledge, behaviors, and skills while enrolled in an academic program. They look for evidence that the program added considerable value to the students’ general competencies as individuals as well as members of their specific disciplines (Ewell, 2001). The goal of developing salient outcomes or core competencies in a curriculum in a rapidly changing health care environment is to ensure that students learn the basic sciences and clinical skills as well as appreciate the diverse cultural, economic, and social factors that influence the health status and utilization of health services of specific populations. Although program evaluation standards are important in measuring overall effectiveness, the following discussion focuses only on measurement of student educational outcomes. Program evaluation is a more comprehensive assessment of the effectiveness of a whole academic unit, including abilities-based outcomes of students. In this chapter we focus specifically on the student educational outcomes as initially discussed in Chapter IV of this Guide.

Outcome assessment involves an understanding of key concepts related to the evaluation of the extent to which a program is achieving intended results with students. Outcome assessment refers to the process of defining and measuring the results of the educational process. In the past, the focus of program assessment had mostly been on what students do, or “outputs.” Outcome-based evaluation, however, focuses on what faculty cause to happen for the student population [Pierce County Community Development Division (PCCDD), n.d.]. Therefore, outcome assessment requires that learning objectives be articulated clearly. It answers the
question, “What are the desirable qualities of an occupational therapy graduate, and what constitutes the essential knowledge base, skills, and professional behaviors that will enable graduates to make a successful transition to the field of occupational therapy?” Intended outcomes work in tandem with a theory of learning to guide selection of instruction processes. 

*Abilities-based outcomes* are another way of naming outcomes. They are statements of intended learning outcomes—what students are expected to know, apply, integrate, care about, behave, and be aware of in themselves at the end of an assignment, class, or course. They answer the question, “What has changed in the lives of students as a result of this program?”

Outcome assessment is accomplished by creating and implementing an outcome measurement plan for the program. The following steps are recommended for developing an outcome measurement plan and accurately measuring student educational outcomes:

1. **Identify meaningful, relevant, and realistic core competencies/outcomes**

   Note that core competencies in a profession are somewhat fluid and shift in response to new evidence of best practice. They should be reviewed and revised periodically in order to keep the program current and relevant.

2. **Create a logic model for your program**

   A logic model makes explicit the philosophy or theory of a program and identifies its processes and outcomes. It shows the relationship between inputs (resources and activities) and outputs (expected results or outcomes). It helps identify the major questions you want the evaluation to answer and provides a graphic summary of how program parts relate to the whole (PCCDD, n.d.). A logic model for the purpose of evaluation of educational outcomes has the following components:

   - **Outcomes**: What will change for the student by going through this curriculum?
- **Resources**: What are the program’s essential ingredients?
- **Activities**: How do faculty and students spend their time related to teaching and learning?
- **Outputs**: What do you count? Which activities will you quantify?
- **Goal**: What is the larger impact (e.g., institutional, community, national, global)?

### Table XII.1 Logic Model Example

<table>
<thead>
<tr>
<th>Resources–Inputs</th>
<th>Activities</th>
<th>Outputs</th>
<th>Short-Term and Long-Term Outcomes</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>To accomplish our set of activities we will need the following:</td>
<td>To address our problem or asset we will conduct the following activities:</td>
<td>We expect that once completed or underway these activities will produce the following evidence of program delivery:</td>
<td>We expect that if completed or ongoing these activities will lead to the following changes in 1–3 years, then 4–6 years:</td>
<td>We expect that if completed these activities will lead to the following changes in 7–10 years:</td>
</tr>
<tr>
<td>Faculty</td>
<td>Develop products, curriculum, and resources</td>
<td>Products, services, and events that are intended to lead to the programs’ outcomes:</td>
<td>Short-Term Objectives—The program will achieve a 90% pass rate on the NBCOT certification exam by (date)</td>
<td>Produce a highly qualified workforce to address the societal and economic needs of clients who benefit from occupational therapy</td>
</tr>
<tr>
<td>Staff</td>
<td>Teach students</td>
<td>Demonstration of use of information, skills, and technology of individuals who will practice occupational therapy in the community</td>
<td>Long-Term Objectives—The program will be strengthened by curriculum modifications that are identified through comprehensive student evaluation</td>
<td>Address the workforce shortage of educated allied health professionals</td>
</tr>
<tr>
<td>Students</td>
<td>Develop assessment methods and procedures</td>
<td>Number of students placed in a mental health practice setting for fieldwork</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infrastructure</td>
<td>Conduct formal and nonformal evaluation of learning outcomes</td>
<td>Students graduated in occupational therapy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Federal, state, and private funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The collection of stakeholder opinions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Just as the Logic Model enables us to design a program with the end in mind, a curriculum model enables us to design a learning activity with the end in mind. A curriculum model nicely complements a logic model. The logic model and curriculum design processes are compatible.
Table XII.2 Basic Logic Model Development Template Example

<table>
<thead>
<tr>
<th>LOGIC MODEL</th>
<th>CURRICULUM MODEL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe Situation</td>
<td>learner needs</td>
</tr>
<tr>
<td>Desired Outcomes</td>
<td>learner outcomes</td>
</tr>
<tr>
<td>Planned Outputs</td>
<td>educational methods</td>
</tr>
<tr>
<td>Needed Inputs</td>
<td>educational materials</td>
</tr>
<tr>
<td>Evaluation Process</td>
<td>evaluation process</td>
</tr>
</tbody>
</table>

3. **Identify indicators to measure success in achieving outcomes**

   An example of an indicator matrix is provided in Appendix XII.A. Outcomes and/or impact indicator statements should be SMART:

   - Specific
   - Measurable
   - Action-oriented
   - Realistic
   - Timed

4. **Select data collection methods and create data collection**

   Outcomes can be measured in a variety of ways. An example of a matrix designed to measure outcomes in mental health knowledge and skills appears in Appendix XII.B.

   - Rubrics
   - E-Portfolios
   - Classroom assessment techniques
   - Competency testing
   - Reflective journals
   - Student and faculty surveys
   - Student and faculty focus groups
   - Logic Models
5. **Design a practical and sustainable data collection plan**

Most short-term outcomes involve skills, behaviors, and knowledge. Curriculum specialists focus much of their energy on how the educator knows when learning has taken place. There are several approaches to this question.

- We can measure cumulative knowledge (posttesting)
- We can measure change in knowledge (pretesting/posttesting)
- We can assess how the learners ask next-level questions (inference analysis)

Our ability to measure learning outcomes is directly proportional to how clearly we have described those outcomes. Confusion and difficulty result from generalized statements of expectations and desired outcomes. The more general the expectation, the less likely we are to demonstrate success, partially because outcome statements that are too general are far more difficult to tie back to a specific intervention.

**B. Resources Needed in Order To Answer Key Questions**

- Descriptions of most common learning experiences designed by educators in the program
- Copies of assignments grading strategies
- Learning objectives and learning outcomes for each course, class session, and assignment as available
- Resources on learning theories and creating instructional objectives
- General rubric for measuring curricular outcomes

**C. Key Questions To Consider**

- How does the program arrive at consensus on student learning outcomes?
• How does the program identify assessment strategies? Does the program have the resources to commit to proficiency, skill-based assessments?

• How does the core curriculum seek to support student success?

• How does faculty communicate the learning outcomes of the core curriculum to students?

• What are the implicit/explicit beliefs about learning embedded in the current educational practices in the program (as evidenced in the educational materials)?

• How do current beliefs of learning that are enacted in the curriculum align with best-practice theories in education?

• Do students know what the learning objectives and learning outcomes are?

• Are learning objectives and learning outcomes written in measurable terms (acceptable verbs, e.g., to write, versus unacceptable verbs, e.g., to know)? (See Appendix XII.A)

• What lasting impact do we want each assignment, exam, and course to have on students? How do we achieve lasting impact, or help lay down episodic memories?

• How do our learning theories support our intended learning outcomes?

• How is faculty effectiveness being measured? Peer review, course evaluations, etc.?

D. Fieldwork Integration

• How can we teach best-practice educational theories and practices to our clinical educators?

• How can we teach abilities-based outcome assessment to our clinical educators?

E. Specific Suggestions

• Conduct a peer-review process of each other’s teaching, looking for implicit theories of learning and alignment with intended learning objectives.

• Complete a content analysis of select educational materials in the curriculum for learning theories and intended learning outcomes.
• Complete a rubric on how outcomes are measured across the curriculum.
• Brainstorm the lasting impacts you imagine the curriculum having on your students 5 years from now.
• Survey graduates [alums] to see what they believe had lasting impact.
• Survey academic fieldwork supervisors for input about the curriculum and student preparedness for fieldwork.

F. Connection to Other Sections of the Model Curriculum

Figure 1 in the Introduction of this Guide depicts abilities-based outcomes as central to curriculum design. Defining abilities-based outcomes is the core of curriculum design and outcome assessment determines the efficacy or impact of a curriculum. This schematic emphasizes all the deliberations that must occur before outcomes are determined based on the vision and mission of the host institution, and are fluid in their influence by “each new student group, each change in faculty, and each course revision” (see Introduction, p. 6).

Chapter IV of this Guide states that “intended outcomes work in tandem with the philosophical frame for learning to guide selection of instruction processes” (see Chapter IV, p. 59). Chapter IV provides a framework for identifying how to develop a philosophical frame for leaning and abilities-based outcomes.

The programs’ learning theory (pedagogical philosophy) should be evident in the content (Chapter VIII), instructional strategies (Chapter IX), and learning sequences (Chapter XI). The intended learning outcomes should be reflected in content, instructional strategies, and learning sequences. Outcomes assessment should help confirm this integration or help identify places in the curriculum where changes should be made in order to achieve the integration that leads to the desired student outcomes.
G. References and Further Readings and Resources (Bibliography)

References


Further Readings and Resources


Pierce County, WA, Community Development Division (n.d.). *Basic outcomes guide*. Available at
http://www.co.pierce.wa.us/xml/Abtus/ourorg/comsvcs/cd/outcomes/BasicOutcomesGuide.doc

Smith, S. R. (2001). *An educational blueprint for the Brown Medical School*. Providence, RI:
Office of Curricular Affairs, Brown University School of Medicine.


http://www.wkkf.org/Pubs/Tools/Evaluation/Pub3669.pdf
Appendix XII.A

ASSESSMENT MATRIX

(Adapted from http://www.aacu.org/meetings/generaleducation/gened2006/documents/Pace.ppt)

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>What general learning outcomes are you seeking?</td>
<td>How would you recognize it (the outcome) if you saw it? How will the student recognize the outcome or be able to demonstrate the ability to complete the outcome?</td>
<td>How will you help the students learn it?</td>
<td>How could you measure each of the desired abilities-based outcomes?</td>
<td>What are the assessment findings?</td>
<td>Based on assessment findings, what improvements might be made?</td>
</tr>
</tbody>
</table>
## Appendix XII.B

### ASSESSMENT MATRIX FOR MENTAL HEALTH OUTCOME EXAMPLE

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Students will identify group task roles through participation in a group by (date).</td>
<td>Using Worksheet 2–4 and pages 40–41 in <em>Cole’s Group Dynamics in Occupational Therapy</em> (Cole, 2005), an operational definition of each targeted role will be discussed and demonstrated by faculty.</td>
<td>Through participation in a simulated group on “assertiveness,” each student will identify each group member’s role (students) supported by a behavior on the Role Analysis Exercise Worksheet, page 42 in <em>Cole’s Group Dynamics in Occupational Therapy</em> (Cole, 2005).</td>
<td>Use a focus-group model to determine consensus on group members’ task roles. Using the Self-Role Analysis Worksheet on page 44 in <em>Cole’s Group Dynamics in Occupational Therapy</em> (Cole, 2005), have the students write a reflection paper comparing their personal insight in role acquisition with the group’s insight.</td>
<td>Faculty determines through the focus group and worksheet activities whether the students were able to learn group task roles and develop personal insight in the role they played in the group.</td>
<td>Based on student feedback from the reflection paper, the faculty will determine what the students know, apply, integrate, care about, and be aware of in themselves at the end of an assignment.</td>
</tr>
</tbody>
</table>
XIII. Exemplar: Application to a Program

Introduction

In this section we provide an example of the application of the recommendations presented in this Guide to “Pine Valley State College,” an imaginary state institution in a Midwestern city. The purpose is to illustrate major steps of curriculum design rather than provide a comprehensive example to be adopted in all institutions. Every institution has its own mission and vision and is situated in a particular context. The task of curriculum design is to develop an educational program that contributes to the mission of the institution while also fulfilling the mission and vision of the profession, in a way that is responsive to long-term trends and quickly changing opportunities in society. This exemplar provides only highlights of this complex process in order for the reader to obtain a bird’s-eye view of the interconnection of all the elements of curriculum design presented in this Guide. The exemplar follows the same order of chapters in the Guide so the reader can refer to each appropriate section for greater understanding.

Chapter I: Context of the Institution

Pine Valley State College (PVSC) is a small, regional public college in a Midwestern state. It is part of a three-college system and is located in a small college town (population 10,000) in a rural county with a population density of 20 people per square mile (the national average is 73 people per square mile). Two Native American reservations are located in neighboring counties. The economy of the region is mostly based on agriculture and cattle. A meatpacking plant and a dairy product factory are the largest employers in the region, and there has been an influx of immigrant workers. The college was started 30 years ago in an effort to keep the current population in the area and to educate professionals who might serve the needs of
the region. The college has 3,500 students and a student-to-faculty ration of 15 to 1. The mission statement of PVSC is as follows:

“Pine Valley State College is a comprehensive institution of higher education dedicated to freedom of inquiry, excellence in teaching and learning, and regional service and development. Offering affordable undergraduate and graduate programs, the College prepares students for careers, advanced study, and civic involvement. The College is committed to faculty–staff–student interaction, public service, and diversity within a friendly and collegial campus community.”

An analysis of the strengths, weaknesses, opportunities, and threats (SWOT) revealed that the president and regional board of the college are very supportive of developing graduate programs in key social service areas, and have identified occupational therapy as a particular interest. The college already has a graduate school offering master’s degrees in business, education, and school administration. The occupational therapy program will be the fourth graduate program, and the only one in a public institution in the state. There is an occupational therapy program in a private, Catholic university in a large city about 350 miles away in the same state. Funding of PVSC is dependent on state priorities that are usually reviewed every 3 years. Recently the graduate program in organizational management was eliminated and resources redirected to the occupational therapy program as part of a vision to support the school districts in the area. There currently are three full-time faculty members in occupational therapy including the program director. The town has a regional hospital, and recently there has been a growing incidence of repetitive motion injuries at the meat plant.
Chapter II: Profession’s Philosophy, Vision, and Trends

The three occupational therapy faculty members reviewed the AOTA Centennial Vision and concluded that there was great compatibility with PVSC’s mission. The commitment to “freedom of inquiry” in the mission statement is well aligned with the Vision’s emphasis on development of a “science-driven and evidence-based profession.” The allusion to “regional service and development … civic involvement [and] public service” in the PVSC mission can be linked with the profession’s commitment to “meeting society’s occupational needs,” and the inclusion of a focus on diversity in the mission statement echoes the profession’s vision for a “globally connected and diverse workforce.” In addition, the college’s emphasis on education and linkages with the regional school district seems congruent with one of AOTA’s identified six focused practice areas that reflect anticipated needs in society in the next decades: children and youth.

The context of the institution also offers unique opportunities for the occupational therapy program and may suggest its particular emphasis. The connections with the school districts and already established agreements for preparing educators and administrators offer the occupational therapy program an opportunity to enhance services to children in the area. The health community is likely to welcome a rehabilitation contribution to the hospital and the care of workers at the meat plant and dairy factory. The proximity of the Native American reservations and the rural setting could help the curriculum prepare students for community-based practice and for studying diverse ways of living, both consistent with the philosophy of occupational therapy.
Chapter III: Program’s Philosophy, Mission, and Vision

The occupational therapy faculty met with leaders of the institution and of the community to gather information and understand the various needs and perspectives that could influence the occupational therapy program or could be influenced by the occupational therapy program. After several meetings and drafts, they developed the following occupational therapy program philosophy, mission, and vision statements:

**Philosophy**

“It is the philosophy of the PVSC department of occupational therapy that human beings best flourish in community and that full participation in society is the right of every person and the duty of every society. Occupation is understood as the processes that link people through meaningful living and therefore serves as both a therapeutic means and a desired outcome. Thus, an educational process that draws on students’ self-direction and expands their social consciousness through civic engagement best prepares them to serve the occupational needs of all citizens.”

**Mission Statement**

“The mission of the PVSC department of occupational therapy is to educate strong general practitioners who are creatively able to meet the occupational needs of diverse people across the life span and respond to fluctuations in the regional health care system.”

**Vision Statement**
“It is the vision of the PVSC department of occupational therapy to be recognized for its teaching and scholarship in community development with a focus on occupational well-being.”

Chapter IV: Philosophical Frame for Learning/Identification of Abilities-Based Outcomes

The occupational therapy faculty at PVSC already began articulating the philosophical frame for learning in the philosophy statement, illustrating how one flows out of the other. The program’s philosophy identifies humans’ growth in the context of community, and emphasizes self-direction, social consciousness, and civic engagement. The occupational therapy faculty takes advantage of the emphasis on education in the college, and consults with members of the education department. Together they identify several pedagogical theories and methods that can support the department’s philosophy, mission, and vision.

The emphasis on self-direction will be informed by adult learning theory (Brookfield, 1991) because it structures ways in which individual learners can become empowered to take increasingly more responsibility for various decisions associated with the learning endeavor. In this philosophical frame, self-direction is viewed as a continuum or characteristic that exists to some degree in every person and learning situation, and emphasizes learning that takes place in social contexts.

The emphasis in the department’s philosophy statement on expanding social consciousness will be informed by critical theory (Brookfield, 2004), considered an extension of adult learning theory. This theory can inform faculty and students about the ways in which humans develop and individual and collective consciousness. It will also help students learn ways in which to explore diverse perspectives, given the coexistence of several cultural and ethnic groups in the region.
Finally, the commitment to civil engagement will be informed through service learning pedagogies (Kaye, 2004) that promote active involvement of the community in the design and implementation of services. Service learning also emphasizes community involvement in the curriculum, which is consistent with the faculty’s vision to be responsive to community needs.

The occupational therapy faculty articulated abilities-based outcomes for the graduates of their program. These outcomes flow from the philosophical frame for learning, and include the following:

1. Graduates will demonstrate entry-level occupational therapist clinical skills
2. Graduates will demonstrate respect for the right of the patient/client to a meaningful, purposeful life as defined by self and society
3. Graduates will be able to facilitate community-based initiatives related to health and well-being
4. Graduates will develop a dedication to lifelong learning and commitment to public/community service
5. Graduates will participate in advocacy and educational roles with patients and their families, students, and others in community and clinical settings
6. Graduates will analyze current trends in health care and anticipate future trends that may have an impact on practice

Chapter V: Curriculum Design

The occupational therapy faculty has articulated the belief that community is central to the understanding and experience of occupation. They have also stated that community is the source of learning, health, and citizenship. Therefore, they wish to depict this feature visually so that it can illustrate the main features of the curriculum. After some discussion, they conclude that they
also wish to include particular processes through in which they will emphasize various features of the curriculum. Thus, they commit to assuring that students will learn occupation through various research methods, that they will apply interventions from an evidence-based perspective, will relate to the geographical community through service-learning opportunities throughout the curriculum, and will emphasize the particular role of occupational therapists in advocating for the occupational needs of the community. After several drafts and much discussion, the faculty members adopt a graphic design that represents the curriculum. With this graphic in hand, they write a detailed explanation that will serve them to explain the relationship of curricular threads and processes of learning in the curriculum.

**Figure XIII.1 Graphic Representation of the Curriculum**

![Diagram of the curriculum threads](image)

**Chapter VI: Curriculum Threads**

While discussing what should be included in the graphic representation of the curriculum, the faculty identified the major threads that should be woven throughout the progression of learning experiences. These include:

- *Community*, as the source, motivation, context, and integrator of occupational performance;
• *Occupation*, as the means through which people build and participate in community;

• *Learning*, as the process in which occupation is developed, including that of student and professional;

• *Health*, as the social need occupational therapists serve and that therefore represents the professional skills required to use occupation as a therapeutic means; and

• *Citizenship*, the demonstration that occupational therapists are part of and responsible to society.

These threads will provide the occupational therapy curriculum at PVSC with a unique identity. The subthemes will be used as specific linkages between the threads. Thus, “science-driven” represents the process of research to be developed and applied throughout the program, whereas “evidence-based” represents the use of interventions that are most effective or that contribute to the body of knowledge of the profession. “Service learning” represents the processes whereby the threads of “health” and “citizenship” are interwoven, and finally, the subtheme of “advocacy” represents the particular contribution that occupational therapists can make to society by supporting the community as it seeks full occupational participation of all its members.

**Chapter VII: Prerequisites**

Once the occupational therapy faculty members at PVSC have identified the main focus of the curriculum, they can begin making decisions about what will be learned in the program and what students should learn in preparation for the program. The mission, philosophy, and vision of the program as well as the identified curricular threads suggest that students should arrive to the program with a strong science base so that they will be free to focus more on the application of that knowledge in the context of occupation. Thus, the faculty will identify prerequisite courses
in human anatomy and physiology that are available at PVSC. The heavy emphasis on
development and learning identified in the threads would benefit from students arriving with
some background in education and developmental psychology. Thus, an introduction course to
learning theory and a lifespan psychology course available at the college are selected as
reasonable preparation. Considering the emphasis that will be placed on the research process as a
way in which professionals should contribute to the knowledge of the profession and as a way
that informs its practice, the faculty decide an introductory course to research methodologies
and/or statistics will likely help students more quickly begin applying the content of the
occupational therapy curriculum. Finally, to emphasize citizenship and life in society, and the
understanding that the context of the institution is one of growing diversity that will require
unique facilitation and consultation skills, the faculty selected courses in anthropology,
sociology, and organizational behavior to provide students with the needed foundational
knowledge.

**Chapter VIII: Content**

At the same time that the faculty consider prerequisites for the program, they begin listing the
broad content areas that will be covered in the curriculum in order to meet the goals they have
articulated. Again, the philosophy, mission, and vision of the program and the graphic design
serve to identify the content that will be included in the curriculum. Because faculty have agreed
that occupational therapists’ expertise in occupation is a unique contribution toward health, they
conclude that they will have courses in which students learn about occupation as it naturally
occurs in multiple contexts and will also study the effects that illness, injury, and disability have
on occupation. A second area of content to be addressed in the program is the way in which
occupational therapists use occupation as a means toward achieving health and participation.
Faculty understand this to include therapeutic intervention skills as well as an understanding of the major health conditions that affect occupational participation. A third area of focus will be that of scientific inquiry and evidence-based practice. The faculty agree that knowledge about a variety of research methods and experience conducting research are essential, and thus want to make sure that qualitative and quantitative research are well integrated. They note that participatory methods will be of great value in the development of leadership and advocacy skills, which is the final content area to be included in the curriculum. The faculty chose to include learning about diversity in this area because they see it as an asset that students should learn to make the most of when working with communities. A summary of broad areas of the curriculum is included in the table below.

### Table XIII.1. Content Areas of the Curriculum

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Health</th>
<th>Scientific Process</th>
<th>Leadership</th>
</tr>
</thead>
</table>
| • Occupational science  
• Human development in the context of occupation  
• Disability theory  
• Learning theory  
• Fieldwork Level I for observation of the above in the “natural environment” | • Health conditions  
• Therapeutic use of self  
• Occupational therapy process  
• Fieldwork Level II for experience in the occupational therapy process | • Introduction to research  
• Participatory research  
• Research project | • Diversity  
• Critical theory  
• Consultation skills  
• Community organizing  
• Advocacy  
• Organizational behavior  
• Advanced fieldwork for experience working with organizations and/or communities |

After identifying these large areas of content, the occupational therapy faculty at PVSC jointly reviewed the specialized and institutional accreditation standards that will eventually be used to review the integrity of the program. Systematically, they identified how each of the standards will be met and/or surpassed in the planned courses.
Chapter IX: Learning Strategies

The occupational therapy faculty agree that the commitment to self-directed learning implies that lecture style courses should be kept to a minimum. Self-directed study can involve various activities and resources, such as self-guided reading, participation in study groups, internships, electronic dialogues, and reflective writing activities. The roles for teachers in self-directed learning include facilitation of dialogue with learners, securing resources, evaluating outcomes, and promoting critical thinking. The faculty further agreed that the courses related most clearly to health and the occupational therapy process, as well as those related to leadership, would be developed following a service-learning model with participation of community members in the decision-making process.

Chapter X: Resources

The decision-making process identified above helped the faculty identify the needed resources to deliver the curriculum. They noted that classroom space must be conducive to small-group, discussion-based learning, and that there should be sufficient laboratory space so that students could practice interventions in simulated cases. Given the likelihood that most service-learning experiences are likely to take place in the primary schools in the county, the faculty created an inventory of equipment used in pediatric practice. In addition, to prepare students to serve patients in the local hospital, standard medical supplies (e.g., wheelchairs, splinting materials) were ordered. The faculty identified a collection of journals that would most serve student learning and worked with the library to make sure they were available either locally or through a regional service. The faculty created an inventory of local clinical sites that might serve as fieldwork settings and contacted the managers to discuss possible agreements. In addition, the
academic fieldwork coordinator contacted other programs in the neighboring states and became part of a fieldwork consortium to make sure that enough fieldwork settings were available to PVSC’s students. Finally, the focus on service learning and research helped the faculty identify that a full-time equivalent clinical instructor would be needed to provide the needed supervision to students working in community building organizations, which are not likely to have occupational therapists employed at this time.

Chapter XI: Sequence

The occupational therapy faculty at PVSC had investigated the prevalent length of study for similar programs across the nation when they initially explored the context of the institution. The college’s general guideline for master’s degrees was 2 calendar years of study, which was consistent with other programs in the country. With that guideline and the desired outcomes in mind, the faculty identified major skills subcomponents for each outcome and discussed at length the best way to build learning gradually so that students would continually integrate new knowledge and practice skills. They decided that the first year of the course sequence would emphasize the understanding of occupation as the primary lens through which occupational therapists view the world. They also decided that the second year would emphasize the unique ways in which occupational therapists can contribute to multiple levels of community development. Initially they grouped the broad content areas into these two categories, and then subdivided each into two semesters. While discussing how to integrate the curricular threads, they agreed to continually emphasize the occupational therapy process through case studies. An early content skeleton chart appears in Table XIII.2.
Table XIII.2. Content Sequence

<table>
<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester 1</td>
<td>Occupation in natural environment</td>
<td>Research Methods</td>
</tr>
<tr>
<td></td>
<td>Human development</td>
<td>Organizational Behavior</td>
</tr>
<tr>
<td></td>
<td>Learning theory</td>
<td>OT Process/Consultation</td>
</tr>
<tr>
<td></td>
<td>OT Process</td>
<td>Advocacy/Leadership</td>
</tr>
<tr>
<td></td>
<td>Fieldwork Level I</td>
<td>Fieldwork Level I</td>
</tr>
<tr>
<td>Semester 2</td>
<td>Health Conditions</td>
<td>Research Project</td>
</tr>
<tr>
<td></td>
<td>Disability Theory</td>
<td>Evidence-Based Practice</td>
</tr>
<tr>
<td></td>
<td>Critical Theory</td>
<td>OT Process/Consultation</td>
</tr>
<tr>
<td></td>
<td>OT Process</td>
<td>Advocacy/Leadership</td>
</tr>
<tr>
<td></td>
<td>Fieldwork Level I</td>
<td>Fieldwork Level I</td>
</tr>
<tr>
<td>Semester 3</td>
<td>Fieldwork Level II</td>
<td>Fieldwork Level II</td>
</tr>
</tbody>
</table>

With this curriculum sequence skeleton, the faculty distributed course development among themselves based on their expertise. They agreed that each course would address all threads as appropriate, and that the occupational therapy process course of each semester would serve as a place where learning experiences would require students to integrate prior learning with the new learning of each semester.

**Chapter XII: Outcomes Assessment**

The faculty at PVSC met to discuss how the program would assess whether it met its intended outcomes. This discussion took place at the same time that individual faculty members worked on developing course proposals to assure that these outcomes guided that process. They began filling out an assessment matrix that would frequently be consulted and updated as the courses took shape. They worked at identifying key indicators for each outcome, which provided additional information regarding how best to sequence learning throughout the curriculum. In addition, as they discussed the learning that should take place in order to meet the outcomes, they confirmed that the resources they had identified earlier would be adequate. An early outcomes assessment matrix appears in Table XIII.3.
Table XIII.3. Outcome Assessment Matrix

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>What general learning outcomes are you seeking?</td>
<td>How would you / students recognize the outcome or demonstrate the ability to complete the outcome?</td>
<td>How will you help the students learn it?</td>
<td>How could you measure each of the desired abilities-based outcomes?</td>
<td>What are the assessment findings?</td>
<td>Based on assessment findings, what improvements might be made?</td>
</tr>
<tr>
<td>Graduates will demonstrate entry-level occupational therapist clinical skills</td>
<td>Conduct an assessment, develop treatment plan and provide/document service</td>
<td>OT Process course each semester Fieldwork</td>
<td>Simulated cases Fieldwork</td>
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</tr>
<tr>
<td>Graduates will demonstrate respect for the right of the patient/client to a meaningful, purposeful life as defined by self and society</td>
<td>Able to interview client in context; explicit integration of client self-direction in intervention plans</td>
<td>Service learning Fieldwork Knowledge of occupational development Critical theory Disability theory</td>
<td>Treatment plans Standardized patient simulations Case studies</td>
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<td>Graduates will be able to facilitate community-based initiatives related to health and well-being</td>
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<td>Graduates will develop a dedication to lifelong learning and commitment to public/community service</td>
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<td>Graduates will participate in advocacy and educational roles with patients and their families, students, and others in community and clinical settings</td>
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<td>Graduates will analyze current trends in health care and anticipate future trends that may have an impact on practice</td>
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</tbody>
</table>
References

