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Capstones: Voices from the Occupational Therapy Profession

Rondalyn V. Whitney

West Virginia University - USA, whitneyrondalyn@gmail.com

Guy McCormack

University of the Pacific - USA, g_mccormack@mindspring.com

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Keywords

capstone experience, capstone project, mentorship, OTD, pedagogy, emerging practice

Cover Page Footnote

I would like to acknowledge Paula Kramer for her persevering mentorship and her generous, indefatigable contribution to the scholarship of the profession. And to Guy McCormack, my first and most enduring teacher in the profession of occupational therapy.

Erratum

Deluliis & Bednarski citation and reference corrected from 2020 to 2019.

Credentials Display

Rondalyn Whitney, PhD, OTR/L, FAOTA

Guy McCormack, PhD, OTR/L, FAOTA

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For over 100 years, the practice of occupational therapy has integrated the work of engineers and architects, artists, doctors, scientists, inventors, activists, change agents, and social scientists in order to ensure an occupationally just world. Educators have incorporated these principles to socialize the next generation of practitioners to the wildly optimistic notion that “man, through the use of his hands, as they are energized by mind and will, can influence the state of his own health” (Reilly, 1962, p. 2).

In this special issue of *The Open Journal of Occupational Therapy* (OJOT), we have curated voices in a broad conversation to discuss how the capstone experience and capstone projects in the occupational therapy profession are currently envisioned to advance knowledge of how the profession may evolve after the coronavirus pandemic. During these unprecedented times we need to take unprecedented actions because there will be a new “normal” for occupational therapy as we go forward. The evolution of scholarship in occupational therapy will reach into the essences of who we are: a profession that blends science and art to promote overall health and well-being through the engagement of occupation. Our professional identity is eloquently expressed in AOTA’s *Vision 2025*: “Occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living” (2017, p. 1). To accomplish this vision, occupational therapy practitioners must be effective practitioners, leaders who can influence change, collaborators, and facilitators of access to occupation. The explicit message of this vision expresses an ambitious future for the profession and asks the question: How do we prepare future occupational therapists to fulfill such an ambitious vision? Perhaps it is no accident that the universe has arranged this special issue to appear during the 2020 coronavirus pandemic that presents our profession with both challenges and opportunities.

Transition to the Occupational Therapy Doctoral Degree and Capstones as Pedagogy

Transition to the clinical doctoral degree (OTD) has not been without controversy, but there is wide agreement among scholars that the intellectual development of the profession is an important concern if we are to reach our potential as essential health care providers. In a recent AOTA webinar, Furniss and Sandhu (2019) discussed the impact of the federal government’s regulatory affairs on the profession’s workforce. We are moving from a volume-based performance measure to a value-based performance measure where the quality of what we do with clients and populations to move them in a direction of a healthy and productive lifestyle will be highly regarded in the future.

In this special issue, Wroten et al. (2020) compared methods of documentation in their article *Effectiveness of Electronic Documentation: A Case Report*. This qualitative case report used an exploratory approach to compare one participant’s handwritten documentation to her electronic documentation to determine the benefits of each. The participant provided 25 handwritten notes and 25 notes created in an electronic health record (EHR) for review. The manuscript highlights that electronic documentation has changed the documentation process and has decreased the time required to record notes while improving their quality. The authors suggest that more practitioners are adopting EHRs to ease the task of documentation. The authors also cite evidence to support the use of EHRs as being faster than handwritten documentation. EHRs meet the ever-growing demand for reimbursement and show the distinct value of occupational therapy.

The manuscript entitled *Occupational Therapy Group Programming for Adolescents with Developmental and Learning Disabilities: A Retrospective Documentation Review*, by Merz et al. (2020), describes a document review study of group programming to help adolescents with developmental and learning disabilities transition into areas unique to occupational therapy practice.

The study involved five high school students 13–20 years of age who received peer debriefing sessions. The methodology used a 5-phase analysis to examine treatment notes to yield themes that may lead to best practices. The outcome of this investigation showed a necessity for more standardized methods of documentation for fieldwork students and for the occupational therapists.

In the manuscript *Experience of Stigma Post Incarceration: A Qualitative Study*, by Sinko et al. (2020), the authors examine the influence of stigma associated with post incarceration. Curiously, the term stigma, derived from Latin, means mark or brand. More recently, however, the term stigma has come to mean a mark of disgrace or shame. According to the authors, little attention has been given to the perspectives and experiences of individuals post incarceration regarding stigma and its impact on reintegration and occupational engagement. This study aimed to understand how stigma is experienced among individuals who were formerly incarcerated and its influence on occupational engagement, specifically social participation, work, and school occupations. In addition, the study examined the role of occupation as an intervention to mitigate the influence of stigma. The authors conducted interviews with 10 participants of a work rehabilitation program for previously incarcerated people. The authors used a thematic analysis and concept maps to highlight the participants' experiences. As a result, four themes were identified as internal perceptions, external perceptions, family systems, and community systems. These four themes appeared to reinforce as well as minimize the impact of stigma on daily life and post incarceration stigma. This study reveals a better understanding of stigma as experienced by individuals who were formerly incarcerated and supports the need for further research in occupational therapy to develop interventions to minimize the impact of stigma.

The capstone projects presented in this special issue show readers that there is little dispute that the nature of what drives changes over a profession's evolution is the use of science, technology, and educational advances in online teaching pedagogy; however, the art of teaching and applying occupational therapy interventions will always be "hands-on," "learning by doing," and in the context of "face-to-face communication." Occupational therapy programs across the country are grappling with the challenge of how to deliver course content and maintain fieldwork education during a time when we are undergoing transformative changes that impact the future of occupation and the preparation of occupational therapists and occupational therapy assistants. Transformation, even growth, is seldom a comfortable process, for students are the "gatekeepers" of the profession. For example, Dr. Whitney had a supervisor who said, "Grow or die, it's the law of nature." That might be our best recommendation during this time of uncertainty and disruption: Familiar, even sacred, practices are being challenged by science and the new normal.

In order to grow, the research agenda for occupational therapy must prioritize critical themes. Research priorities for the future must invite researchers and practitioners to collaborate. The six research categories that need to be addressed are assessment/measurement, intervention research, basic research, translational research, health services research, and research training. The educational research priorities include educational theory, pedagogy, instructional methods, learner characteristics and competencies, socialization into the profession, and faculty development (Hooper, 2016). Thus, there is much work necessary to make AOTA's vision a reality. Capstone projects and experiences may be the key to garner occupational therapy's potential to significantly contribute to the value-based performance measures that will reveal the true value of occupation and the profession's scientific agenda.

We propose that occupational therapists apply our knowledge not only to enrich others but also to assimilate the worldview of occupational therapy into our own lives. More than ever before, there is

pressure to meet the needs of an anxious and struggling society and to embrace occupation as we shelter in place. Society needs methods of discernment. Like in the past, society continues to play a significant role in establishing and aligning our educational efforts to meet individuals' needs. It is reasonable to suggest that we do not leave practice in the current state of uncertainty but, instead, permeate critical reasoning, assessment, and the ability to integrate scientific reasoning into our everyday implicit and explicit models of practice.

While no single issue of a journal can be comprehensive, this issue includes manuscripts related to the essential tools of the processes and best practices in current use (i.e., building mentor capacity, leadership capacity, scholarship of learning, emotional intelligence resources, reflection as a method of teaching and learning, mentor competency, assessment of the capstone process, and effective engagement of mentors). Deluliis and Bednarski (2019) have created a step-by-step guide for implementation and dissemination of the capstone experience and project for the OTD. For instance, Stephenson et al. (2020) speak to the importance of using strong curriculum design and mentorship to ensure successful capstone experiences and projects. In their article, Stephenson et al. articulate the way ACOTE standards guide the design of the doctoral capstone and the process for completing the project, from planning to execution. As with any novel process, having a model is critical; we are certain readers will agree and find this article to be an essential reference.

Exemplary Projects in Areas of Emerging Practice

As occupational therapy expands the scholarship of the profession, exemplary science demonstrates the unique value of the profession. As students engage in the capstone experiences and develop capstone projects, knowledge of the profession is advanced and the practice of occupational therapy supported with well-executed evidence. One such exemplary demonstration of and discussion related to executing categories is O'Neill and Gutman's novel study, *Effectiveness of a Metacognitive Shopping Intervention for Adults with Intellectual Disability Secondary to Down Syndrome*. This is the first empirical study to demonstrate the effectiveness of an occupation-based intervention designed to improve shopping skills in adults with intellectual disability related to Down syndrome. The importance of this study to capstone project design cannot be overstated. This study proposes a broader vision of scholarship outlined by Boyer (1990), such as scholarship of discovery (e.g., replication of this study with a larger sample), integration (connecting the findings of this article to new populations or areas of occupation), application (applying these findings to practice by creating manualized approaches in practice for individuals with intellectual disability [ID]) and teaching and learning (creating educational modules related to metacognitive approaches in transition planning).

The article by Lally et al. (2020), entitled *Bundling Payment Initiatives for Total Hip and Knee Arthroplasties: Perspectives of Health Care Professionals*, adds to the growing body of knowledge that is needed in a climate of unprecedented change and disruption. The purpose of this study was to better understand how rehabilitation health care professionals and hospital administrators perceived the effects of the bundling initiative on coordination of care for patients who underwent hip or knee arthroplasties. Based on available evidence, the authors cited examples where bundling payments with adequate quality monitoring can effectively increase the coordination of care with Medicare beneficiaries who receive total joint arthroplasties. The fixed reimbursement for total joint arthroplasties has been shown to reduce costs, eliminate unnecessary services, and maintain or improve quality of care.

The researchers used a broad qualitative approach to analyze data from health care professionals and administrators employed in a Midwest area hospital system using a focus group, phone interviews,

and email communication. They analyzed data collected from five administrative personnel and eight rehabilitation health care professionals who work in a facility that participates in a bundling initiative payment model. The results of the investigation generated four major themes: importance of care coordination, increased efficiency and effectiveness, establishing protocols, and challenges of bundling payment. The hospital administrators reported that implementation of collaborative practice decreased readmission rates for patients receiving hip and knee arthroplasties. These informants reported experiencing an improvement of care coordination through better use of interdisciplinary communication along with improved treatment efficiency to keep readmission rates and patient length of stay levels low. study's findings indicate the significance of interprofessional collaboration and communication and the benefits of adherence to rehabilitation protocols with hip or knee arthroplasties.

Occupational therapists who are addressing a broad scope of practice and scholarship in the profession must explore, document, and assess the evidence of these practices. The scholarship of Teaching and Learning (SoTL) focuses on both the outcomes of teaching in the profession (O'Brien et al., 2016) or the methods by which occupational therapy educators meet the specified learning objectives related to the capstone project and experience (Hinojosa & Howe, 2016). In this issue, Mason et al. (2020) discuss fieldwork educators' expectations of students' professional and technical skills. The results of the study can inform the curricular decision-making and future capstone projects. Expanding on this paper, researchers might opt to evaluate the SoTL related to the findings in this study or a broader assessment of practice areas (to include mental health and pediatric practice) as a scholarship of discovery capstone.

Conclusion

Between the two editors of this special issue, we have over 35 years in academia. During that time, we have watched the quality of presentations and poster sessions at the annual AOTA conference improve as more occupational therapists graduate from doctoral programs. As students develop and benefit from close mentorship with faculty who have developed their own scholarly agendas, they enter the profession highly engaged in the pursuit of evidence-based, science-driven practice.

Capstone definitions and requirements are addressed in the eight standards (ACOTE, 2018) and follow the recommendation of the Ad Hoc Task force to (a) identify signature pedagogy for occupational therapy education; (b) evaluate innovative models of education, including workplace learning to identify what is and is not effective in preparing students for future practice; (c) promote cross-health profession investigations on education processes and outcomes centered on critical questions related to preparing and ensuring graduates ready to provide competent, efficient care in a collaborative interprofessional model; and (d) establish opportunities for dissemination of research and scholarship focused on occupational therapy education.

Perhaps more than ever before, the practice of occupational therapy and its services and treatment modalities have gained ubiquitous acceptance without anchor to the art and science of our profession and the practices that birthed them. How do we, as part of the medical community, respond to this? O'Neill and Gutman (2020) demonstrate the use of methodology and operationalizing variables related to the performance of occupations to focus on the importance of both measuring efficacy of treatment and to support critical reasoning and outcomes. It is appropriate to consider the context of practice. For example, in my daily ventures in various Facebook groups, I am often reminded of how important it is that our profession and practitioners have the skills to assess the difference between fact and hyperbole critically, to discriminate scholarship from pseudoscience, and to clinically create ways to

evaluate the newest trend in health care. In the context of today's world, with technology, fast-feed information, the explosion of innovation, and the rapid onset of novel diseases, or even radical change in the sociopolitical context, occupational therapists must be engaged and excited about critically assessing occupation-based practice, from classical therapies, like habit training, to the newest innovations or shiny things in practice. Capstones, then, have the opportunity to be exemplary models important to the growth of our profession.

The capstone studies reviewed in this special issue suggest that students participating in entry-level OTDs are using, for the most part, qualitative research methodology that identifies themes that appear to be relevant for addressing the shifting trends in health care reimbursement and the quality of care for populations. The qualitative nature of these studies may appear to be reaching for "soft" data and themes. However, the structure of the capstone projects is determined by ACOTE standards, and the guidelines do not appear to be asking for quantitative investigations that are similar to the requirements for programs offering a Doctorate of Philosophy and a dissertation.

Capstone projects have a life of their own. Capstone projects do not need to answer cause and effect questions seen in the randomized control studies. Based on this small sample, it would appear that the clinical doctorate is reaching into that "soft spot" in the health care industry that will reveal important findings in the realm of occupation-base practice that will, indeed, advance the profession of occupational therapy.

We started this letter by affirming that occupational therapy is both a science and a practice, with a rich history of clinical scholarship and practice ethos. Thinking critically about what we do today to improve the quality of occupations is who we are. Over 100 years ago, Ora Ruggles (a reconstruction aide) left us this message: "Reach for the heart as well as the hands, it's the heart that really does the healing" (Carlova & Ruggles, 1946, p. 69). Today she might add, "Reach for the hearts of students, that they love the science of our profession, it's that heart that will do the healing." If we are to achieve a broader impact, then we must ensure we have understandings beyond our own familiar protocols and assess each new problem and potential solution to meet the promised outcome of our profession, that occupational engagement has therapeutic value.

In the "They Said" article in this issue, a panel of educators, scholars, and innovative leaders discuss the concept of the capstone experience and the opportunity for the impact of capstone projects on the profession. Through their own experiences, the contributors offer counsel for successful capstone experiences. Dr. Paula Kramer suggests works of scholarship are worthy when they are characterized by the program's curriculum. Drs. Anne Cronin and Karen Jacobs advocate for the careful selection of mentors and the importance of building a resilient mentor-mentee relationship. Dr. Jacobs reminds us, "you cannot dip from an empty bucket or pour from an empty cup." Dr. Varleisha Gibbs captures the opportunity and the challenge by encouraging the profession to embrace mentors as part of their community and ensure mentors see the value in becoming part of the community

There is no doubt that there are challenges in bending our educational models to make room for the OTD and capstones, but we can take as a starting point that on which we agree: There is a global consensus that we need to better articulate the unique value of our profession's contribution to individual, group, and population health. We hope we can move beyond resistance to change, engage ourselves in the task, and embrace the value that capstones bring to the profession as emphasized in this issue of OJOT.

Rondalyn Whitney, PhD, OTR/L, FAOTA, is an associate professor and director of faculty scholarship and development at West Virginia University. Her scholarship focuses on maternal stress and mother-child interactions when raising a child with a mental, behavioral, or developmental disorder. Focusing on the co-regulation of the child, the story of adverse childhood experience, and family quality of life and occupational deprivation is a unique perspective in her work.

Guy L. McCormack, PhD, OTR/L, FAOTA is a guest speaker and advisor and previously served as the interim program director and clinical professor in the Occupational Therapy Doctoral Program at the University of the Pacific. He is also a professor emeritus at Samuel Merritt University. He received his BS in Occupational Therapy at the University of Puget Sound, his MS at the Ohio State University, and his PhD at Saybrook University. He is a co-editor for the AOTA OT Manager, author of *Pain Management for Health Professionals*, and author of *Therapeutic Use of Touch for Health Professionals*. Dr. McCormack has published numerous journal articles and presented several papers at state, national, and international conferences.

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