

Opportunities, Challenges and Recommendations of Non-Traditional Placements for Occupational Therapy Students: A Review of The Literature
(Peluang, Cabaran dan Cadangan Penempatan Bukan Tradisional untuk Pelajar Terapi Cara Kerja: Tinjauan Kesusasteraan)

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ABSTRACT

Many studies have been conducted to test the effectiveness and functionality of non-traditional placements in place of traditional clinical placements. This review aims to explore the opportunities and challenges in conducting a non-traditional placement among occupational therapy students and provide recommendations to improve the practice. The EBSCOhost search engine was used to search through three databases for articles ranging within 10 years. A secondary search was done and several additional references were found through other sources. A total of 10 articles were included in this review. The review found that many opportunities could be gained from non-traditional placements in terms of professional development, personal growth and potential role development. The challenges arise in the development of core clinical and professional skills, supervisory model and implementation of the placement. In conclusion, occupational therapy students can benefit from non-traditional placement despite the challenges in its implementation. Careful planning and proper strategies are important to mitigate challenges and thus enhance the efficiency of a non-traditional placement in students' clinical placement.

Keywords: Occupational therapy, non-traditional placement, opportunities, challenges, students.

ABSTRAK

Banyak kajian telah dilakukan untuk menilai keberkesanan dan fungsi penempatan bukan tradisional dalam mengganti penempatan klinikal tradisional. Ulasan ini bertujuan untuk meneroka manfaat dan cabaran dalam melaksanakan penempatan bukan tradisional dalam kalangan pelajar terapi cara kerja serta cadangan untuk menambahbaik praktis tersebut. Enjin carian EBSCOhost digunakan untuk mencari artikel dalam lingkungan 10 tahun melalui tiga pangkalan data. Pencarian sekunder telah dilakukan dan beberapa rujukan tambahan telah dijumpai melalui sumber lain. Sejumlah 10 artikel digunakan dalam ulasan ini. Ulasan ini menemukan banyak manfaat dapat diperoleh daripada penempatan bukan tradisional dari segi perkembangan profesional, perkembangan diri dan potensi perkembangan peranan. Cabaran timbul dari segi perkembangan kemahiran teras klinikal dan profesional, model penyeliaan dan pelaksanaan penempatan. Kesimpulannya, pelajar terapi cara kerja boleh mendapat manfaat daripada penempatan bukan tradisional di sebalik cabaran dalam pelaksanaannya. Perancangan yang teliti dan strategi yang sesuai adalah penting untuk mengurangkan cabaran yang dihadapi dan seterusnya dapat meningkatkan keberkesanan penempatan bukan tradisional dalam pembelajaran klinikal pelajar.

Kata kunci: Terapi carakerja, penempatan bukan tradisional, manfaat, cabaran, cadangan

INTRODUCTION

Occupational therapy literature shows that non-traditional placements work as alternatives to traditional clinical placements. Traditional clinical placement is the initial clinical placement approach that utilises 1:1 direct supervision where one clinical supervisor guides one student in a traditional clinical setting where the role of occupational therapy has already been established. Non-traditional placements are also referred to as placements that apply “a variety of supervisory models and contexts” (Overton, Clark & Thomas 2009) and those that consist of components unique to the traditional model of clinical placements (Thomasz & Young 2016). Non-traditional placement requires students to work on problems that are directly related to the community and social environment in which the health conditions arise (Fortune & McKinstry 2012).

Researchers have been conducting extensive studies to develop a variety of non-traditional placements (Cameron et al. 2013; Rosenwax, Gribble & Margarial 2010; Thomas et al. 2017; Williams et al. 2010). These placements are said to have existed in the allied health sciences world since the mid-1970s (Overton, Clark & Thomas 2009), with more studies being conducted to enhance their effectiveness and functionality.

Unlike the traditional placement model of practice which is more to an ‘apprenticeship’ clinical placement model where the student receives direct supervision (the degree of supervision may vary according to context) and role modeling of the clinical supervisor (Clarke et al 2014), the non-traditional placement adopts more students’ self-learning model which includes role-emerging clinical placement model (Clarke et al. 2016; Overton et al 2009) and project focussed clinical placement model (Hamilton et al. 2015). The role emerging clinical placement model refers to a condition where the student is posted to a setting where occupational therapy services are not routinely provided and the supervision is provided by a member of the staff at the agency or organization. The formal supervision and assessment are done by an occupational therapist organized by the agency or university (Clarke et al. 2016; Overton et al 2009). This model promotes autonomous and self-directed learning, professional development, and lifelong learning skills (Fitzgerald et al. 2017; Thomas et al. 2007; Overton et al 2009). The project-focused clinical placement model involves a student or group of students carrying out a project for the placement setting for example developing a service or a resource during their clinical placement. In this case, the student received

on-site supervision from a staff member of the agency or organization (James & Prigg 2004; Overton et al 2009). The literature identified the main drive of non-traditional placements as the shortage of placements in allied health sciences, also so in occupational therapy (Clarke et al. 2016; Imms et al. 2018; Overton, Clark & Thomas 2009; Price & Whiteside 2016; Rindflesch et al. 2009; Thomasz & Young 2016). The need for better health and welfare services due to the aging population and diseases brings about a need for well-educated and competent health professionals including occupational therapists, which in turn results in more institutes training students in the allied health sciences (Cleak & Smith 2012; Price & Whiteside 2016). The increase in this need is ensured by saturation in the search for suitable and cost-effective settings for clinical placements in the traditional model (Price & Whiteside 2016). Cleak and Smith (2012) also mentioned that traditional placements have been perceived as time-consuming and intensive, despite their high satisfaction rate in terms of learning skills and knowledge.

Other factors leading up to this phenomenon were also identified by Clarke et al. (2016). Whilst traditional placements offer direct supervision and models from whom students may learn, placements in a diverse setting with a variety of supervisory models may help to broaden students' opportunities to develop skills and knowledge from different aspects (Clarke et al. 2016). These skills and knowledge are vital to the industry change in allied health sciences where the community setting for health services is gradually being developed due to the background and conditions of people receiving care (Cleak & Smith 2012).

The opportunities offered by non-traditional placement have made many occupational therapy educational programs worldwide adopt this approach in meeting the practice education needs of the increased number of enrolled students. The World Federation of Occupational Therapy has set a minimum of 1000 hours of clinical hours placement as a requirement for entry to practice (World Federation of Occupational Therapy (WFOT) 2016). Occupational therapy educational programs in Australia are reported to commonly using innovative approaches such as role emerging placement and project-based placement for their students’ clinical placement education (Hamilton et al 2015). In the United Kingdom, the University of Bradford has supported this role-emerging placement since 2005 (Fitzgerald et al. 2017). The placement involved all the third-year students. Two students are placed at the local organisation for three days a week for a nine-week duration. During the placement, students are required to identify the needs of the clients at the organisation

and conduct the occupational therapy services that meet their needs. The non-traditional placement approach at this university is found beneficial to the students and perceived as essential in supporting the development of the occupational therapy profession (Fitzgerald et al. 2017).

In Ireland Linnane & Warren (2017) reported that some universities had instituted service learning with community agencies. For example, the full-time role emerging placement was started in 2009 at the Occupational Therapy Program at the University of Limerick (Warren et al. 2010). The Association of Occupational Therapists of Ireland (AOTI) had regulated this type of placement practice to occur to a maximum of 300 of the 1,000 placement hours and in the second half of professional programs (Association of Occupational Therapists of Ireland (AOTI) 2010).

In Hong Kong, Li-Tsang et al. (2009) documented a group of Hong Kong Polytechnic University final-year occupational therapy students' perceptions of their eight-week experience in emerging clinical placement. The students were placed in a health facility in Shenzhen, China which is adjacent to Hong Kong. The facility did not provide occupational therapy services. The students received informal supervision from the occupational therapy clinical educator that provided by the university. The students in this study provided more positive feedback in the area of self-directed learning, problem-solving and creative thinking. The findings of this study support the positive effect of non-traditional placement on occupational therapy students' learning of clinical skills.

In Malaysia, published literature regarding occupational therapy student's clinical placement is very limited. Generally, occupational therapy educational programs at universities and colleges adopted traditional placement for their student's clinical placement. Often, students are placed at occupational therapy clinics in hospitals, health facilities, or rehabilitation centres. However, service learning with community organisations such as community-based rehabilitation centres known as PDK in Malay, and other non-organisations for persons with disabilities is well established in some universities or colleges. The Community Rehabilitation Based course is one of the necessary courses offered by most occupational therapy educational programs. Recently, a university has reported adopting non-traditional placement where the students are placed in the Special Education Integrated Program (SEIP) which is known as Program Pendidikan Khas Integrasi (PPKI) in Malay for eight-week durations (Zaid et al. 2021). Students learned to collaborate with special education teachers in delivering occupational

therapy services at the SEIP as the occupational therapy school-based service is not yet established in Malaysian schools (Zaid et al. 2021). Given the benefit of the non-traditional placement in students clinical education, this review will explore the opportunities and challenges of conducting non-traditional placements among occupational therapy students. Recommendations from different studies on enhancing the effectiveness of non-traditional placements will also be discussed.

METHODS

This study uses a content analysis approach. A literature search was done using the EBSCOHost Discovery search engine in which the literature was identified through several online databases including EBSCO Psychology and Behavioural Sciences, EBSCOMedline, and EBSCOJournals@Ovid. As the main topic includes occupational therapy clinical education, the term "occupational therapy" was used. Clinical education was referred to in many contexts and many other terms were used in literature. Thus, the keywords "clinical education", "placement" and "fieldwork" were all used to search for corresponding articles.

Limitations were applied to obtain articles in the last 10 years. Literature search was also limited to those in English and with full text available. The abstracts were read through to gain further insight into the content of the articles and articles were retrieved according to the inclusion and exclusion criteria.

Besides the limitations applied, articles were also included if occupational therapy program participants were involved along with other programs and focused on clinical placement. No limitations were placed on the type of design or literature. Additional references were retrieved from Google Scholar and included in this review after conducting a secondary search. The flow chart for the literature selection process is presented in Figure 1.

RESULTS AND DISCUSSIONS

A total of 10 articles were retrieved from the initial 46 articles obtained through the search engine. Among the 10 articles, two were reviews on non-traditional placements (Clarke et al. 2016; Overton, Clark & Thomas 2009), Clarke et al. (2016) focused on role-emerging placements while Overton, Clark & Thomas (2009) focused on role-emerging and project placements. Price and Whiteside (2016) and

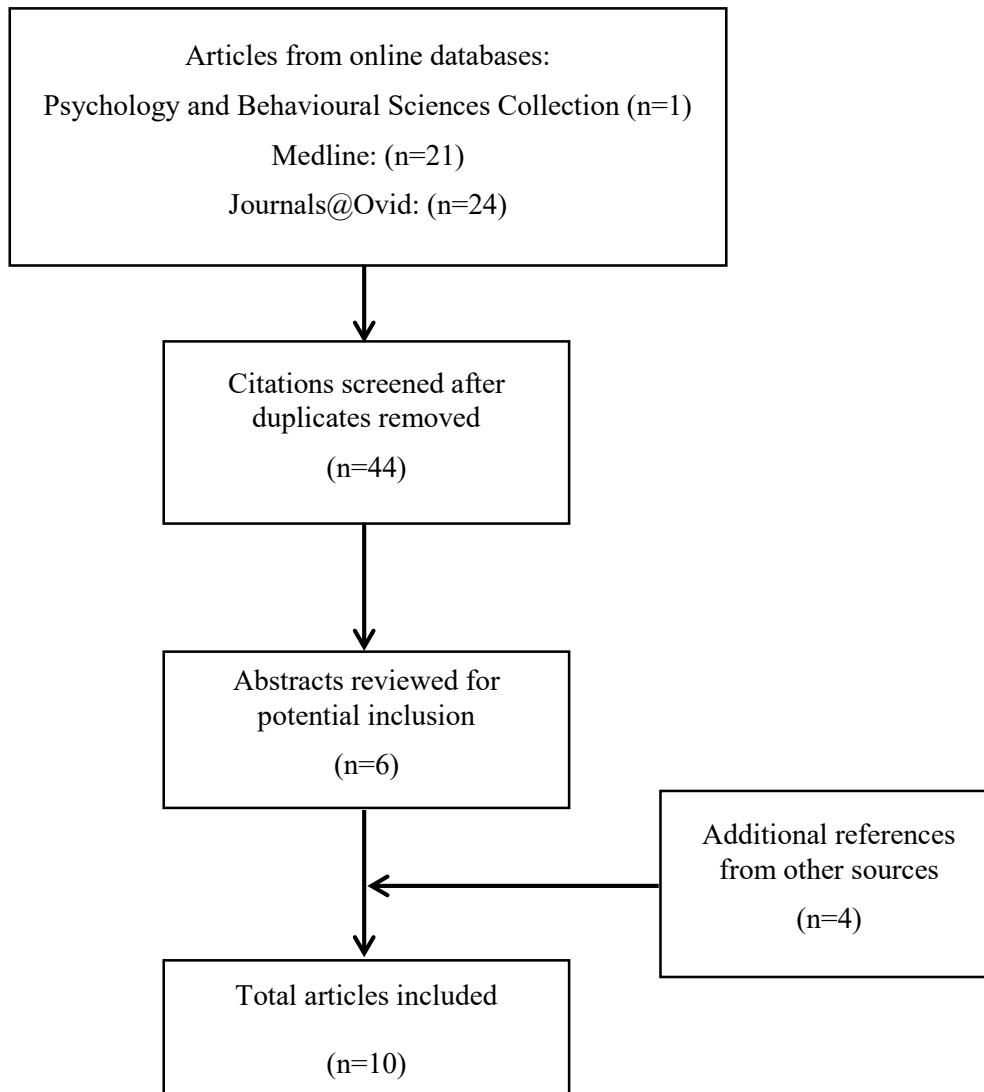


FIGURE 1. Flow chart of the selection of articles

Rindfleisch et al. (2009) studied the collaborative model of clinical placement also known as the 2:1 or 3:1 placement system while Howell, Wittman & Bundy, (2012) used an inter-professional model. Adam, Strong & Chipchase (2013) used a mixed model which consists of elements from both collaborative and inter-professional models. Another study focused on a placement where supervisors work a dual role as case managers and allied health professionals (Thomasz & Young 2016). Imms et al. (2018) studied a simulated placement where a variety of activities is designed to simulate a traditional clinical placement setting. Lastly, Thew, Hargreaves & Cronin-Davis (2008) and Thomas et al. (2017) studied role-emerging placements in their research. The main themes that are reviewed based on

the articles are opportunities and challenges in non-traditional placements, and finally, recommendations to improve non-traditional placements. The summary of findings from the 10 articles is presented in Table 1.

OPPORTUNITIES IN NON-TRADITIONAL PLACEMENTS

Opportunities that are brought by non-traditional placements are diverse, benefitting not only students but also the other stakeholders. Opportunities uncovered by the literature will be categorised into three main opportunities, namely professional development, personal growth and potential role development.

TABLE 1. Summary of findings from the articles

No.	Author	Participants	Relevant Findings
1	Adam, Strong & Chipchase (2013)	Total participants, n=26 Bachelor's degree: 16 PT, 8 OT Master's degree: 2 OT	Opportunities: Improvement in area-related skills, improved understanding of the role in the area Challenges: decrease in core knowledge, supervisory style not suitable for all, lack of client contact Recommendation: Briefing before placement
2	Clarke et al. (2016)	(Review) number of articles included not stated	Opportunities: development of relevant professional and personal skills, development of professional identity, increased knowledge and application of occupation Challenges: lack of clinical exposure, lack of core skills, difference in student capabilities, different expectations Recommendations: adequate pre-placement preparation, setting out clear roles and expectations, site visits
3	Fieldhouse and Fedden (2009)	OT student, n=2	Opportunities: greater awareness of therapeutic use of self, understanding oneself as an occupational being, developing skills in assessment and observation, applying activity analysis and adaptation, recognising the importance of person-centered goal setting, linking theory with practice
4	Howell, Wittman & Bundy, (2012)	n=8, first and second-year graduate study, OT and psychology students	Opportunities: Learning role as a professional, appreciating professional differences, interpersonal skills Challenges: Students value clinical experience more than teamwork, varying levels of experience between different professions, different schedules

- 5 Imms et al. (2018) 6 Australian OT university programs across 5 Australian states (Review) number of articles included not stated
- 6 Overton, Clark & Thomas (2009)
- 7 Price and Whiteside (2016) OT supervisors, n=9
- 8 Rindflesch et al. (2009) -
- Opportunities: effective development of students' professional behaviours and communication skills, sustainable, consistent
- Challenges: Proper planning of implementation and length
- Recommendation: Proper planning to increase effectiveness
- Opportunities: view the client as a person, develop clinical reasoning, professional and personal development, and potential role development.
- Challenges: development of clinical skills, design of placement model, less knowledge of professional's role, incomprehensive evaluation
- Recommendations: Brief students, prepare relevant coursework, and clinical supervisors prepare adequately.
- Opportunities: Peer learning
- Challenges: reduced clinical experience, workload, individual differences among students, impact on patient
- Recommendations: Clinical supervisors be equipped with evidence-based approach, plans of learning opportunities, and joint tasks; collegial and organisational support, pair students according to performance
- Opportunities: Development of relevant professional skills in students and clinical supervisors
- Challenges: Time constraints, individual student differences, workload
- Recommendations: brief on expectations, spare time for feedback, allow change in need of feedback

9	Thew, Hargreaves & Cronin-Davis (2008)	OT students, n=21	<p>Opportunities: Increase knowledge of occupation, improve personal skills, discover unmet needs, increase awareness of professional skills</p> <p>Challenges: preparation of clinical supervisors, supervisory style not suitable for all, different expectations, lack of support</p>
10	Thomasz and Young (2016)	<p>OT, n=10</p> <p>SP, n=4</p> <p>PRC, n=2</p>	<p>Opportunities: learning opportunities, experiencing profession-related roles</p> <p>Challenges: incomprehensive guidelines on tasks, time constraints, insufficient clinical experience</p>

OT: Occupational therapy; PT: Physiotherapy; SP: Speech pathology; PRC: Paediatric rehabilitation coordinator

Professional Development

Many pieces of literature discussed the development of professional knowledge and skills of the students after being trained in a non-traditional site (Adam, Strong & Chipchase 2013; Clarke et al. 2016; Howell, Wittman & Bundy, 2012; Imms et al. 2018; Overton, Clark & Thomas 2009; Rindflesch et al. 2009; Thomasz & Young 2016). The most prominent skills being developed are clinical reasoning and reflective practice skills. In a non-traditional setting with less supervision from off-site supervisors, students had more opportunities to evaluate the situation at hand and develop new solutions to problems, instead of following practised methods and conforming to the usual routine (Howell, Wittman & Bundy, 2012; Overton, Clark & Thomas 2009; Rindflesch et al. 2009; Thew, Hargreaves & Cronin-Davis 2008; Thomasz & Young 2016). Reflective practice is an essential tool to facilitate learning from clinical placement experiences (Boyd & Fales 1983). They also emphasized that the process of learning through reflective practice is the key element to facilitating the students' ongoing learning (Boyd & Fales 1983). In a comparison study by Imms et al. (2018) the professional practice skills learned by students in non-traditional placements were not inferior to students in traditional placements.

Students have also reported being able to consolidate theory and knowledge learned in class well in non-traditional settings, showing a deeper understanding of what they learned by applying it in placements (Adam, Strong & Chipchase 2013; Clarke et al. 2016; Imms et al. 2018; Overton, Clark & Thomas 2009; Rindflesch et al. 2009). Imms et al. (2018) developed a simulated clinical placement with a traditional clinical placement as a control. While students in the traditional placement group reported having more opportunities to develop clinical reasoning skills, another outcome measure showed that students in the simulated placement group had more opportunities to demonstrate their professional behaviours when interacting with stakeholders (Imms et al. 2018; Thew, Hargreaves & Cronin-Davis 2008).

In inter-professional and role-emerging placements, students also learned to develop their professional identity and become more aware of their role in society (Adam, Strong & Chipchase 2013; Clarke et al. 2016; Howell, Wittman & Bundy, 2012). As students interact with professionals of other health sciences and stakeholders outside of their program, students will have to think critically from their perspective about how they can contribute to the setting as an occupational therapist and assert

their identity to other personnel (Clarke et al. 2016; Howell, Wittman & Bundy, 2012). When participating in inter-professional placements, students are also able to learn about the differences between disciplines and approaches in handling a client. In these situations, they can understand the role of an occupational therapist in non-traditional settings.

Rindflesch et al. (2009) in describing the Mayo Collaborative Model of Clinical Education (MCMCE) highlighted the benefits of such placement models for clinical instructors. Besides promoting professional development in students, clinical instructors are also able to develop in the role of an occupational therapist. Since this model of placement utilizes independent learning among two or more students, instructors learn to facilitate their learning by employing different strategies (Rindflesch et al. 2009). Therefore, instructors learn to connect with students while coping with the difference in students' learning styles (Rindflesch et al. 2009). This experience increases dedication to the role and developing clinical skills along the way. Rindflesch et al. (2009) also highlighted the improved productivity among clinician instructors in clinical settings.

Personal Growth

Many aspects of personal growth can be encouraged by non-traditional placements. Non-traditional placements move away from the traditional model of 1:1 direct supervision, which often results in one clinical educator teaching two or more students. In this situation, independent learning is the most noted way of learning for students (Overton, Clark & Thomas 2009; Price & Whiteside 2016; Rindflesch et al. 2009). Independent learning encourages students to search for resources before consulting their clinical educators for other opinions on solutions (Rindflesch et al. 2009). They also learn to be more resourceful, initiative and creative in problem-solving, thus improving their skills in solving a problem independently and not always relying on their clinical educators (Overton, Clark & Thomas 2009; Price & Whiteside 2016; Rindflesch et al. 2009). Thew et al (2018) support this type of experiential learning matches the needs of the millennial and Gen-Z generation students who are also known as the digital generation and support an autonomous practice that is much sought by employers.

Non-traditional placements also promote peer learning on occasions when two or more students are under supervision from one clinical supervisor or all on-site therapists without a specific supervisor. Students are encouraged to communicate with each other when they face a problem and learn from each other, especially in

inter-professional settings as they learn more from other professionals (Howell, Wittman & Bundy, 2012). This indirectly improves their interpersonal skills. Besides, working with peers provides them with social support as they can encourage and motivate each other as they encounter challenges together (Price & Whiteside 2016). Being with peers under the supervision of one clinical supervisor also brings them positive peer pressure as they compete with each other to achieve better (Rindflesch et al. 2009).

Other personal growths that can be developed in students include a greater understanding of the sense of self, therapeutic use of self (Clarke et al. 2016; Fieldhouse & Fedden 2009), and exploring a variety of roles relevant to the profession (Overton, Clark & Thomas 2009; Thomasz & Young 2016). When students experience non-traditional placements, especially in role-emerging placements, the specific condition of the placement encourages them to understand more about their clients in terms of occupation and use that awareness when providing treatment, achieving therapeutic use of self (Fieldhouse & Fedden 2009). Besides, in these placements, a “lack in the hierarchy” (Overton, Clark & Thomas 2009) offers opportunities to students to experience more profession-related roles such as case management (Thomasz & Young 2016).

Development of Potential Roles

Clinical placements in non-traditional settings assist in promoting the role of occupational therapy in new settings (Clarke et al. 2016; Overton, Clark & Thomas 2009; Thew, Hargreaves & Cronin-Davis 2008). Subsequently, students will learn to discover and address needs in new settings, encouraging more employment opportunities (Overton, Clark & Thomas 2009). On the other hand, in settings with occupational therapy services, non-traditional placements reinforce the role of occupational therapists in these settings (Clarke et al. 2016).

CHALLENGES IN NON-TRADITIONAL PLACEMENTS

There are many challenges in conducting non-traditional placements, limiting the learning experiences of students in certain areas. Challenges uncovered by the literature include the development of clinical and personal skills, supervisory models, learning styles and evaluation.

Development of Clinical and Professional Skills

Although non-traditional placements provide opportunities for students to enhance several skills, some literature identified that students would miss out on core professional skills that can be developed in the well-guided routine in a traditional placement (Adam, Strong & Chipchase 2013; Clarke et al. 2016; Overton, Clark & Thomas 2009; Price & Whiteside 2016; Thomasz & Young 2016). Adam, Strong & Chipchase (2013) found that students who had a placement in a non-traditional setting had reduced knowledge of the choice of assessments after the placement, suggesting that their knowledge of assessments may be influenced by the placement setting.

Some non-traditional placements also showed a reduced opportunity for clinical experience (Adam, Strong & Chipchase 2013; Clarke et al. 2016; Overton, Clark & Thomas 2009; Price & Whiteside 2016; Thomasz & Young 2016). The proportion of students to clients affects their chance of interacting with clients and having hands-on experience. Too many students treating one client might affect clients emotionally too (Price & Whiteside 2016). Therefore, they have reduced clinical experience.

In addition, Howell, Wittman & Bundy, (2012) found that working with many peers might affect students who had less experience or were academically weaker as peer pressure may reduce their confidence. When working in an inter-professional non-traditional setting, students may also face challenges in asserting their professional identity instead of promoting their role to other professions (Clarke et al. 2016; Howell, Wittman & Bundy, 2012; Overton, Clark & Thomas 2009). If students do not have a firm foundation of professional awareness, their development might be affected.

Supervisory Model

The supervisory model used in non-traditional placements is not perceived as satisfactory by all students. Some students described this model as lacking demonstration from experienced therapists (Clarke et al. 2016), lacking support (Adam, Strong & Chipchase 2013; Thew, Hargreaves & Cronin-Davis 2008) and lacking feedback (Rindflesch et al. 2009) from clinical supervisors. Non-traditional placements lack direct supervision from clinical supervisors (Adam, Strong & Chipchase 2013). While this model is good for developing independent learning (Overton, Clark & Thomas 2009; Price & Whiteside 2016; Rindflesch et al. 2009), not every student prefers this way of learning.

Clarke et al. (2016), Price and Whiteside (2016) and Rindflesch et al. (2009) stated that clinical supervisors discovered that each student has individual differences and needs that may require different learning styles. This difference may improve clinical supervisors in terms of educating students if done effectively, but it also results in an increased workload for them (Price & Whiteside 2016). If clinical supervisors do not attend to students' individual needs, the student's learning experience may be affected. They might also become dependent on their peers when completing their tasks as clinical supervisors are not always there to assist them (Price & Whiteside 2016).

Planning and Implementation

Time constraint is another challenge in conducting non-traditional placement. When students are involved in a group project within a placement, students need to plan their schedule properly to carry out discussions so that their schedules will not affect their performance (Howell, Wittman & Bundy, 2012). Besides students' schedules, clinical supervisors also require proper planning in terms of educational strategies. Facilitating more than one student takes up time and attention so that proper demonstration and evaluation can be carried out (Price & Whiteside 2016; Thomasz & Young 2016). If clinical supervisors face challenges in balancing time among clients, students and their work, their burden will increase.

Outlining a well-planned non-traditional placement is a complex issue that involves many aspects. Unclear expectations have been discovered to be one of the challenges in conducting a non-traditional placement (Clarke et al. 2016; Overton, Clark & Thomas 2009). This may be due to the lack of direct supervision from both on-site and off-site clinical supervisors (Overton, Clark & Thomas 2009). Guidelines are also important in a non-traditional placement so that students experience sufficient clinical hours besides experiencing other profession-related roles (Thomasz & Young 2016). A lack of communication between on-site and off-site clinical supervisors is also identified as an issue in planning a non-traditional placement (Clarke et al. 2016). Besides, clinical supervisors noted that the distribution of students according to performance is essential as not every student can cope with a non-traditional setting as it requires more skills than in a traditional setting which focuses on core skills (Clarke et al. 2016). An efficient evaluation system is also required (Overton, Clark & Thomas 2009). Considering all these factors, it is difficult to decide if 1000 hours is sufficient to provide students with the

required clinical experience if non-traditional clinical placement is used (Imms et al. 2018).

RECOMMENDATIONS TO ENHANCE NON-TRADITIONAL PLACEMENTS

Suitable strategies are needed to enhance the benefits gained from non-traditional placements and to minimise the challenges faced.

Detailed Briefing

Students should be briefed before attending clinical placement (Adam, Strong & Chipchase 2013; Overton, Clark & Thomas 2009). They should be briefed on their roles and responsibilities during placement alongside what is expected of them (Clarke et al. 2016; Rindflesch et al. 2009). They should also be taught about relevant skills that will be needed in non-traditional placements to prepare them for the placement (Clarke et al. 2016). Pre-placement interviews can also be carried out (Overton, Clark & Thomas 2009). On the other hand, clinical supervisors should also be briefed on the roles of students, including what they are supposed to do during placement so that they can facilitate students better (Howell, Wittman & Bundy, 2012).

Pre-placement Preparations

The faculty should prepare students with relevant coursework before clinical placement (Overton, Clark & Thomas 2009). They should also reduce barriers as much as possible so that students can focus more on their tasks (Howell, Wittman & Bundy, 2012). Besides, efforts should be made to identify on-site supervisors (Clarke et al. 2016) and increase communication with the supervisors (Thew, Hargreaves & Cronin-Davis 2008). Constant site visits should be made to ensure everything goes as planned (Clarke et al. 2016).

In addition, clinical supervisors should also be well-prepared (Overton, Clark & Thomas 2009). They should be well-equipped with various approaches and plans for the student's learning experiences besides sparing time to give feedback (Price & Whiteside 2016; Rindflesch et al. 2009).

Suitable Evaluation

A suitable evaluation system should be planned in conjunction with the various variables in a non-traditional setting (Overton, Clark & Thomas 2009). Students should also be allowed to "change in their

need for feedback" as they gain experience and can work more independently (Rindflesch et al. 2009).

CONCLUSION

Review of the literature regarding non-traditional placement in occupational therapy students shows that non-traditional placement could offer both opportunities for learning and challenges in students' clinical learning. Particularly, non-traditional placement can provide opportunities for students to learn about professional development, personal growth and development of potential role. Proper planning and careful design are crucial to help mitigate the challenges of non-traditional placement thus enhancing the efficiency of a non-traditional placement in students' clinical learning. Further studies on the potential of non-traditional placements and essential criteria in a non-traditional placement could be carried out to provide a better learning environment for students and clinical supervisors.

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