
Editorial

Students graduating competency is everyone's business: Is it time for transformation, rejuvenation and reformation of 21st century practice education?

Reports of hand wringing about insufficient placements for numbers of students are prevalent in the literature on practice education and have been particularly relevant recently due to COVID-19. There is evidence of a range of new placement models to address this ongoing issue, and there is variance in programs as to what constitutes placement hours (Brown *et al.*, 2015). These debates in practice education have been ongoing for many years and at times appear to be unresolvable. These include the following questions:

- Do 1,000 hours of practice education ensure competency in graduates?
- How does the traditional supervisor/s – student apprentice model practice placement compare with other placement models such as role emerging or project placements in the development of student competency?
- Why do educators take or not take students on placement?
- Do students negatively or positively affect service delivery?
- What are students' and practice educators views of quality pedagogical processes in practice education?
- How do we best manage underperforming students?
- Can simulation replace practice education? Despite significant research, mostly unfunded, there does not appear to be firm answers to these questions.

Research is most often limited to single universities and the majority of studies are descriptive (Roberts *et al.*, 2015).

To reframe the questions it may be useful to equate practice education to Occupational Therapy practice. The focus in practice is evidence-based interventions and measuring the effectiveness of interventions through the application of outcome measurement. Translational research provides practitioners guidance on evidenced-based effective interventions. The outcome of practice education is student competency as delineated by national regulators and/or professional bodies. The contemporary question, therefore, is “how do universities show evidence that they are producing competent work ready graduate therapists?”

There are several issues for consideration when answering this question. The first issue is what is competency (how is it defined and interpreted)? Followed by questions of outcome measurement that include, what are the levels of competency (novice to competent) and how can student competency

attainment be evidenced? There has been a call in Australia for an “active dialogue and debate” between all stakeholders, universities, regulators, healthcare providers and professional associations on placement models and sustainability, but such discussion also needs to address the questions above (Brown *et al.*, 2015, p. 354). The outcome of such discourse could be transformational for practice education and therefore ultimately for the profession. The CanMeds framework provides a good example of how the medical profession addressed the expected outcomes of medical education in Canada using a competency framework. This framework delineates six overarching competencies, professional, communicator, scholar, health advocate, leader and collaborator, all of which contribute to the core competency of medical expert. The framework includes milestones of progression from novice to mastery (Frank *et al.*, 2015).

While it is important to define the outcome of practice education and student competency, evidence-based interventions that achieve the desired outcome are also required. Essential dialogue is required on effective pedagogical processes of competency development and attainment in the Occupational Therapy profession nationally and internationally. The outcome of such dialogue could be the review of existing research and the production of an international research agenda that has the potential to strategically direct research activity to measuring and evaluating the processes of competency development.

Competency development of course does not only develop in practice education but in various learning situations or environments. Structured environments such as simulation, university managed student led clinics or telehealth services and of course, academic modules provide opportunities for specific competencies to be developed practiced and assessed. Pedagogical approaches in academic modules can include simulation with robust assessments of performance such as Objective Structured Clinical Examination (OSCE). Unstructured environments also provide the potential for competency development and attainment. These include service-learning, volunteering, community engagement, participation in communities of practice and research or projects.

Rather than a focus on practice education, a whole programme approach to student competency attainment may therefore be more relevant. This approach would remove the dualistic divide between academic and practice education content in curricula. Similar to integrated care pathways that establish service structures to follow patient's needs, the whole program approach would orientate curricula to the student's progression and attainment of competency. For students to traverse the silos of modules and holistically manage their competency development, competency-based e-portfolios can be applied (Bramley *et al.*, 2021). These enable a student to focus on their competency gaps but also

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confirms their competence/skills. Going forward this enables students to complete entrustable professional activities in structured or unstructured environments. Entrustable professional activities are practice tasks that the student should be able to perform independently at point of graduation (Hanson and Bannister, 2016). These are being widely used in medical education.

Having competent graduating students that are well equipped to be effective practitioners, leaders, advocates, innovators and entrepreneurs is essential to the future of the profession. For transformation, there needs to be both stakeholder agreement on a graduate therapist competency framework and an international funded research agenda to rejuvenate and reform practice-based curricula through robust translational research on competency development and attainment. Is 1,000 hours of practice education relevant to ensure graduate competency in 21st century curricula? It may be time for the educational landscape to be reoriented to a whole program approach with integration of competency development and attainment under the auspices of education for practice.

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