



Committee for the Evaluation of  
Occupational Therapy Studies Program

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**Tel Aviv University**  
**Department of Occupational Therapy**

Evaluation Report

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September 2012

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## Chapter 1: General Background

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

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

- Prof. Winnie Dunn, University of Kansas Medical Center, USA– Committee Chair
- Prof. Tal Jarus, The University of British Columbia, Canada<sup>1</sup>
- Prof. Annette Majnemer, McGill University, Canada
- Prof. Kenneth J. Ottenbacher, University of Texas Medical Branch, USA

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

Within the framework of its activity, the Council for Higher Education asked the Committee to:

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

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

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

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<sup>1</sup>In accordance with the CHE's policy, Prof. Tal Jarus did not participate in the evaluation of Occupational Therapy studies at TAU to prevent the appearance of a conflict of interests.

## Chapter 2: Committee Procedures

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

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

This report refers to the Occupational Therapy Department at Tel Aviv University. The Department of Occupational Therapy was established in 1976 as part of Continuation Studies at the Faculty of Medicine. In 1985 the Department of Occupational Therapy was recognized by the Council for Higher Education and became a part of the Sackler Faculty of Medicine. In 1989, the School of Health Professions was established within the Faculty of Medicine, as a superstructure for four departments: the Department of Occupational Therapy, the Department of Nursing, the Department of Physical Therapy, and the Department of Communication Disorders. In 2006, the School of Public Health was established, and in 2008 a new 4-year MD graduate program was inaugurated.

The Committee's visit to Tel Aviv University took place on June 13-14, 2012 and it included two days of intensive meetings with appropriate administrators, tenure and tenure-track faculty, and bachelor's, master's and doctoral students and visits to libraries and laboratory facilities as well as Clinical Sites. We thank appropriate individuals for their involvement in our proceedings. Their input allowed us to explore many of the issues raised in the self-evaluation report.

The schedule, including the list of participants representing the institution, is attached as **Appendix 2**.

### **Chapter 3: Executive Summary**

The Department of Occupational Therapy at the Tel Aviv University has a committed faculty who are invested in quality education. They are not only preparing qualified professionals for clinical practice, they are also initiating innovations to prepare their graduates for the future. They attract very qualified students who choose occupational therapy when they have other choices. They offer a thesis and non-thesis master's degree, providing maximum flexibility for their community. There was a shortage of sufficient space for teaching and research. Safety concerns exist with respect to space related to classes being held in rooms with a smaller capacity than the number of students in the courses. We also make recommendations about the Department exploring innovative fieldwork placements to manage the needs for placements, particularly with the establishment of other occupational therapy programs in the area. They also have initiated research programs and have outlined a strong research agenda for current and future doctoral students. With less than optimal staffing, they have demonstrated their ability to be productive in the research area, but their ability to make contributions that match their potential is hampered by shortages in faculty, and also considering the amount of teaching expected in this department (4 programs). We recommend that additional tenure track positions be provided to this unit to enable greater productivity, breadth of research and allow the department to meet the growing needs of doctoral training in the field. They also host international experts to remain current and abreast of knowledge in related fields. We recommend that the Department establish a formal mentoring program for pre-tenure and tenure track faculty, including involvement with senior faculty in other departments to support development of this faculty and department. We also recommend that they consolidate their research themes to make the graduate student mentoring process more efficient and effective for them. We recommend that they engage in a strategic planning process to identify their own priorities so they can align their resources with these priorities. We also recommend some adjustments in the tenure process to reflect appropriate criteria for this discipline.

The report is organized by topics, with a brief summary of each topic and a listing of strengths. The last section of the report summarizes all the recommendations.

## **Chapter 4: Department Evaluation**

### **1. Mission, goals**

The Tel Aviv University's Rector has set the mission and goals for the schools, and the School of Health Professions set goals consistent with the Rector's goals. The department of occupational therapy describes activities consistent with these goals, suggesting that the occupational therapy program is relevant and contributes to the university's mission and goals. The occupational therapy program states that they are committed to training excellent clinicians, leaders and researchers, and aspire to strong international influence through teaching, research and innovation in occupational therapy.

They have also set mission and goals for each of their programs. The BOT program at Tel Aviv University aims to prepare students to become competent occupational therapists, equipped for safe and effective practice in a variety of health care settings within a global workforce. The MSc program at Tel Aviv University supports occupational therapists to become leaders in research, clinical practice and the promotion of health and well-being. The PhD program focuses on cultivating the students' skills to conduct research and become independent investigators.

The Department of Occupational Therapy is addressing its mission and goals for preparing competent entry level professionals and leaders in clinical practice. They also have initiated innovations for occupational therapy practice and research, and are poised to implement a strong research agenda for faculty and as they mentor doctoral students.

#### **STRENGTHS**

The Department of Occupational Therapy is addressing its mission and goals for preparing competent entry level professionals and leaders in clinical practice. They also have initiated innovations for occupational therapy practice and research, and are poised to implement a strong research agenda for faculty and as they mentor doctoral students.

### **2. Study programs - curriculum, evaluation of all degrees**

The Department of Occupational Therapy includes three programs: Bachelor of Occupational Therapy (BOT); a Master of Science in Occupational Therapy (including thesis and non-thesis options) (MSc); and, a PhD program offered through the Graduate School of Medicine PhD program. The PhD program is part of the Tel Aviv University's Unit for Doctoral Students.

## **STRENGTHS**

The entry level Bachelor's in Occupational Therapy is based on relevant theory and includes an innovative curriculum involving problem-based learning opportunities and an emerging focus on community-based practice.

The clinical components of the BOT curriculum are well organized throughout the program and provide the students with opportunities to integrate their academic learning with relevant clinical experience.

The BOT program attracts high quality students and is respected in the local clinical community.

The BOT program has clearly defined teaching and learning outcomes that are evaluated on a regular basis. The results of the evaluation process are used to make changes to the curriculum.

The graduates of the BOT program are well prepared academically and have an excellent pass rate on the national licensing exam.

The MSc is flexible and offers students two tracks (thesis and non-thesis) to accommodate their academic and career goals.

The PhD is part of an established doctoral education program affiliated with the Graduate School of Medicine PhD Program and maintains high standards of scientific excellence for all PhD graduates.

### **3. Organization - Committees, decision process**

The faculty in the Department of Occupational Therapy clearly has a participatory organizational structure. Various configurations of senior and junior faculty serve on committees to carry out the administrative work of the department. Faculty members seem committed to this process as a way to foster communication among faculty and build a sense of ownership within the department.

## **STRENGTHS**

The faculty members are very committed to the department and to student learning. They are a cohesive group of colleagues who enjoy working together, and feel supported in their work.

The Chair, Dr. Ratzon, has instituted several key innovations since her arrival, including problem-based learning, community practice and participatory leadership, which have had a positive impact on the department.

Dr. Ratzon secured lost faculty positions for the department to stabilize them.

#### **4. Teaching and Learning outcomes -Teaching methods; evaluation and improvement of teaching; methods used to evaluate learning outcomes**

The Department of Occupational Therapy has a clear curricular plan for each of their programs. Dr. Ratzon, the Occupational Therapy Department Chair, has led several innovative initiatives in her tenure, such as developing community-based practice options and instituting problem-based learning. First, they revised their BOT curriculum to employ problem-based learning, which also enabled them to reduce the credits necessary for undergraduate coursework. Second, they are emphasizing community-based practice, reflecting a forward thinking trend in occupational therapy and consistent with their priority to move from a medical model to a social behavioral model of practice, and to support students to embrace their roles as vital community resources. Third, they are making a commitment to interdisciplinary teaching and learning, exposing their students to wider perspectives and supporting them as they learn to work with colleagues from occupational therapy other disciplines.

The Tel Aviv University has a strong mechanism for evaluating and supporting teaching. The Center for Evaluation of Teaching provides a means for student feedback to be summarized, and for faculty to obtain feedback and supports. Additionally, the Department of Occupational Therapy has a strong structure for supporting faculty, responding to student suggestions and for mentoring clinical colleagues who participate in clinical supervision, problem based learning and adjunct teaching responsibilities. Full time and part time faculty also support each other in teaching by planning together, providing feedback in co-teaching situations and collaborating to support students who need extra attention to be successful.

The faculty, adjunct faculty and clinical preceptors all have a strong commitment to the Department of Occupational Therapy at Tel Aviv University. They talk about feeling supported, collaborative and included in planning, decision making and problem solving. In spite of heavy teaching loads, each member feels a sense of cohesiveness and commitment to the department.

#### **STRENGTHS**

Faculty members have a proactive plan to support minority groups of students.

The department has prioritized driving rehabilitation research and practice, which is vitally important in Israel re: accident prevention strategies.

Students perform well on the national exam; more than 20% pursue a master's degree.

The faculty is successful at meeting their educational mission and goals.

## **5. Students - Actual admission data (including exceptions); grading, services; outcomes alumni, etc.**

The panel had the opportunity to meet with students in the BOT program, the Master's program and the PhD program. Faculty and clinical supervisors also commented on the quality of their students in the respective programs. There are approximately 250 students in the BOT, 50 in the Master's program and 3-5 in the PhD program. All BOT graduates are employed as occupational therapists soon after graduation. Many of the Masters and PhD students receive small internal scholarships, however, with rare exception; graduate students continue to work in the clinical settings almost full time.

### **STRENGTHS**

Students admitted to the BOT program score highly on the psychometric tests (generally >650) and there is 100% success rate on the national certification examination following completion of the program.

Students receive instruction in Hebrew but have a very good command of the English language, enabling them to read the relevant scientific literature in the domain.

There is an affirmative action program and a commitment to support students from minority groups (e.g. Ethiopian, low socioeconomic status, outlying regions) or with special needs (e.g. learning disability).

Entry requirements appear appropriate. Criteria for student advancement are clearly articulated.

Greater than 20% of graduates of BOT pursue Master's degrees.

The Master's programs are quite large (minimum 15 new students enrolled each year) with the majority of students choosing the thesis option over the non-thesis option.

The Department attracts several (3-5) applicants each year to their PhD program, however due to limited number of occupational therapy faculty that can supervise; most students do not find supervisors in their respective areas of research interest.

There are generally less than 10% of students who drop out of the BOT program, for a variety of reasons. Drop-out rate is extremely low in the graduate programs.

Students from all degree programs are generally extremely satisfied with the quality of the program, course content and the level of support and guidance from faculty. In particular, students in the BOT program emphasized the unique strengths of the problem-based teaching approaches used over the first 3 years. They felt that they were better in clinical reasoning, problem-solving and they were more confident in the clinical context due to the PBT approach.

**6. Human resources - Faculty quality and quantity; achievements; promotions; updated; fields, number; ratio; administrative staff, etc.**

The Chair of the Department, Dr. Navah Ratzon assumed her leadership position 5 years ago. At that time, the department lost 3 of 9 Senior Staff. These senior faculty members are more likely to hold administrative/leadership positions and to be on tenure stream and conduct research. Over the past 5 years, Dr. Ratzon was able to maintain 6 senior positions and gain four additional junior positions, which has greatly helped support the burdensome teaching needs in the expanded undergraduate BOT program as well as the expanded MSc program (minimum 15 new applicants per year). The tenure stream will need to be more attractive as a career path within this Department for them to be able to compete for high quality applicants with strong doctoral/postdoctoral training and a promising research track record.

The current faculty complement includes senior Academic Staff, junior Academic Staff, and Adjunct Staff. There are 5 Senior Faculty which include 2 tenured Senior Lecturers (Ratzon, Rand), 1 tenure track Lecturer (Bart) and 2 Senior Teachers. There are 7 Junior Faculty members (4.9 positions) and numerous Adjunct Teaching staff teach one or two courses, are PBL tutors, and/or coordinate fieldwork placements.

**STRENGTHS**

The faculty manages to meet the teaching needs of the 4 programs (BOT plus 3 graduates) in spite of limited human resources. However, this is at the expense of fulfilling their research mission.

In spite of this shortage in faculty complement both in terms of tenure track and non-tenure track staff, the faculty appears to be highly engaged and committed to the Department's mission. Their dedication and loyalty to the Head of the Department is laudable, and it is apparent that the faculty members (full time and part time) work very hard and contribute substantially to decision-making, leading new initiatives and programs, and taking on very heavy teaching loads.

Many of the faculty, senior and junior have PhDs and are abreast of recent evidence in the field of occupational therapy. They frequently host national and international experts to update professional knowledge and are also committed to organizing regular continuing education workshops and lectures to frontline clinicians.

**7. Research: Internal and external allocations, including grants, fellowships; publication, international status**

The Department has a commitment to the development of knowledge and the training of scientists. This commitment is expressed in the statement of the Department's Vision for Research.

"The Department of Occupational Therapy will demonstrate local, national and international leadership in advancing the knowledge and development of occupational therapy and rehabilitation science through inter-disciplinary collaborative research that is used in education, clinical practice and social policy to enhance participation and well-being for persons with disabilities and their families. We aim to promote the advancement of knowledge of occupation and enablement through active research, dissemination and publication within the profession and between disciplines, and across the different levels of degree and staffing of the department." (Page 98).

## **STRENGTHS**

The Department has identified a wide range of Research Themes (p.99 and Sup 4.2 pp. 71-80).

The majority of the tenure-track faculty and early career (junior) faculty have earned PhDs.

The faculty members have established research collaborations outside of the Department and School of Health Professions (e.g., Schools' of Bio-medical Engineering, Life Sciences, Occupational Medicine) and University (e.g., Dana Children's Hospital, Loewenstein Rehabilitation Hospital).

The Department has an established PhD program with a demonstrated ability to produce PhD graduates.

Faculty members have published approximately 100 refereed journal articles, 4 books and several book chapters in the past five years (Sec. 4.7, p.104).

Faculty members have obtained \$1,357,290 (NIS) in competitive grant funding and \$48,590 NIS in non-competitive grant funding over the last five years (p. 103).

## **8. Infrastructure: Labs, library, IT, etc**

We participated in a tour of the building and the library. The Department of Occupational Therapy is situated within the School of Health Professions in the Raymond Building for Health Professions. This building is on the northeastern side of the campus and is adjacent to the Sackler Faculty of Medicine and the library.

## **STRENGTHS**

The building is modern, well ventilated and has a lot of natural light. It is wheelchair accessible.

Two new laboratory spaces were recently acquired in the basement for research purposes. They house research equipment related to movement capture and driving rehabilitation.

The library is accessible and meets the needs of the Department.

In order to expose occupational therapy students to more sophisticated equipment, adapted rooms and rehabilitation technologies that are not available at the university, field visits are arranged to enable students to learn about their application and use as part of intervention strategies.

Students with special needs are appropriately accommodated within the university setting.

### **9. Self-Evaluation process: Current and ongoing**

The occupational therapy faculty conducted a comprehensive self-evaluation process to prepare for our visit. They identified strengths and weaknesses of their program that are consistent with our findings, suggesting that they are ready to take strategic steps to ensure their department becomes a strong member of the research academic community.

We agree with some of their concerns, including the need to increase the number of senior faculty, decreasing faculty teaching loads, increasing emphasis on research productivity and capacity building, increasing formal mentoring of faculty, improving relationships with alumni and the need to address infrastructure challenges. We will describe our recommendations to address these needs in the next section.

## RECOMMENDATIONS

### 1. Mission/goals:

- 1.1. We recommend that the Department of Occupational Therapy engage in a strategic planning process and set specific annual and long term goals for their teaching and research agendas. The current heavy emphasis on teaching at the BOT and MSc levels makes it challenging to dedicate time to the research and doctoral mentoring agendas. A strategic planning process provides a mechanism for prioritizing faculty time and commitments to ensure that the research profile of the Department is enhanced without sacrificing quality in the teaching missions.

### 2. Study programs:

- 2.1 The number of students in the BOT program has increased substantially in recent years without a corresponding increase in the teaching staff, classroom space and related teaching resources. Serious consideration needs to be given to increasing the teaching resources (faculty, teaching assistants) and providing adequate classroom space to accommodate the expanded student enrollment.
- 2.2 The ability to provide high quality clinical training experiences is essential to the success of the BOT program. The number of clinical placements is threatened by external factors (the development of new programs). Resources and strategies need to be identified to maintain the quantity and quality of the BOT Program's clinical placements.
- 2.3 We recommend the two tracks of the MSc program be more clearly defined and re-structured. The MSc thesis option should be directly linked to the PhD program. Students selecting the MSc thesis option would be tracked into the PhD program. The MSc non-thesis option needs to be designed for students who are interested in a graduate degree for advancement in administrative and management areas; the curriculum for the non-thesis option needs to focus on these areas, making this program fundamentally distinct from the MSc thesis option, which includes a commitment to a PhD track when they apply for the program.
- 2.4 We recommend the PhD program also be restructured. As currently configured and operated, the PhD program is too small and narrowly focused to significantly add to the existing scientific environment. Creating an interdisciplinary PhD Program, similar to the rehabilitation sciences PhD in North America, would allow the program to recruit from a wider pool of potential PhD applicants and will also create an opportunity to collaborate with senior faculty advisors from other departments at the University. This shift in focus also requires the University to change the enrollment requirements to accommodate more PhD students and less Master's students without financial penalty to the department [currently required to admit 15 Master's students per year].

### **3. Organization:**

- 3.1 With the finite number of faculty in the Department of Occupational Therapy, we recommend the department consider alternative ways to increase efficiency of administrative work. It may be helpful to reconsider what committee structure will support the future growth and development of the Department of Occupational Therapy, particularly to increase the research profile.
- 3.2 We recommend that the faculty conduct a time audit to determine how they are collectively spending their time. The Department can then compare this summary to the strategic goals to identify what they will change, abandon and enhance to make sure their time spent aligns with their strategic goals.
- 3.3 We recommend that the Department of Occupational Therapy restructure the way they report information about the Department. For example, it is important to report not only how many PhD students enroll, but also how many students apply that they cannot accommodate to show the demand for their PhD program.
- 3.4 We recommend that the Department of Occupational Therapy create a formal mentoring program for pre-tenure and tenure track faculty.
- 3.5 We recommend strengthening relationships with alumni to provide additional fieldwork and financial support.

### **4. Teaching:**

- 4.1 Given the competitive context with private colleges, we recommend that the relevant university and government bodies evaluate appropriate compensation for clinical fieldwork supervisors across disciplines, and based on these findings, provide compensation to occupational therapy supervisors that reflect this equity. Supporting the clinical education component of the Department illustrates commitment to all aspects of student learning. Additionally, we recommend that Clinical Preceptors be given faculty appointments [without salary] contingent upon the number of students they take in their facilities [e.g., 5 students in every 3 years], and get access to electronic libraries to support their evidence based practices.
- 4.2 The Department of Occupational Therapy faculty has instituted many innovative and progressive teaching methods, but each faculty's current teaching responsibilities are well beyond typical teaching loads. We recommend that the appropriate university and government bodies provide teaching assistants, doctoral student stipends and additional faculty positions [some of which would enter the research/ tenure track] to support these innovations.

- 4.3 Faculty members spend a lot of time supporting student learning. We recommend that the faculty examine ways to increase independence in students' responsibilities for their own learning. For example, faculty might consider what teaching and support activities actually reduce or prevent students from experiencing a sense of empowerment to solve problems, make independent decisions and navigate using their own resources.
- 4.4 We recommend that the occupational therapy faculty evaluate their teaching/ learning activities to identify how to support students as adult learners, emphasizing more independent learning, problem solving and decision making. We also recommend that faculty explore additional self-directed teaching opportunities (peer teaching, online modules) for students that could replace some classroom teaching hours. Additionally, we recommend faculty evaluate all of their assignments to consider the balance of faculty load, student load and student learning outcomes; perhaps there are more efficient and effective ways to continue teaching with quality. For example, students indicated that decreasing Problem-Based Learning meetings to once every 2 weeks would yield the same outcomes, but would cut the teaching needs in half (8 groups per year x 2 years).
- 4.5 We recommend the faculty consider other strategies for streamlining teaching requirements in the program, such as: a. faculty might carefully examine whether all courses are necessary for training generalists in occupational therapy, which is the expectation at entry level; b. faculty determine if all the tasks and functions performed by faculty are needed (e.g. clinical site visits for all students); c. faculty offer electives (e.g. for graduate students) every second year to decrease teaching needs and increase class size for these specialized courses.
- 4.6 We recommend that the appropriate university and governing bodies provide additional:  
a. Teaching Assistant positions and b. tenure track faculty positions and c. junior teaching track faculty positions commensurate with the large enrollment in this department.
- 4.7 We recommend that the faculty implement innovative strategies to increase access to clinical placements, such as placing 2 students with 1 supervisor to increase peer to peer support during the clinical placements, identifying additional emerging areas with no current occupational therapy services [e.g., community practice sites] for student innovation clinical experiences, and selected international placements.

## 5. **Students:**

- 5.1 Graduate programs are restricted to occupational therapists. We recommend that the department broaden the student profile for the PhD program to include students from related disciplines or areas of study relevant to the research programs. This complementary expertise would enrich the interdisciplinary collaborations and the richness of the research projects.
- 5.2 We recommend that the Department of Occupational Therapy conduct regular annual surveys of graduates to provide a formal mechanism for objective program evaluation.

5.3 Alumni activity appears minimal and has not been a priority in the past. We recommend that the faculty implement strategies to build relationships with alumni to enhance partnerships for teaching and clinical supervision collaborations and possibly donations. The Department may wish to work with the University's development office to enhance 'giving' and seek donors for particular programs, awards and scholarships, or for funding small projects within the department.

## **6. Human resources:**

- 6.1 The faculty is severely under-resourced in terms of full time junior and senior faculty (<10 faculty for greater than 300 students). Adjunct appointments fill the numerous gaps but can minimize cohesion. In order to maintain and appropriately support these programs, additional non-tenure track faculty and teaching assistants are needed. If this is not feasible, then the number of students should be appropriately decreased to ease the teaching burden (see related recommendations in other sections).
- 6.2 Recruitment of tenure track faculty has been extremely challenging. A reconfiguration of the tenure stream faculty's roles and responsibilities emphasizing research activities and supervision of doctoral students is necessary to attract high caliber Senior Faculty members (tenure-track).
- 6.3 The number of faculty in the tenure stream is very low (n=3), and insufficient to provide the breadth of research expertise needed to attract doctoral students across a range of interests related to occupational therapy. Tenure track staff is severely overburdened with teaching responsibilities, with very limited dedicated time for their research program. The tenure track staff holds administrative leadership positions (Head of Department, Head of BOT or MSc programs), further limiting their dedicated time for research. We recommend the addition of 3 tenure stream positions for a total of 6 tenure stream positions.
- 6.4 In terms of promotion, there are only two tenured faculty members and one other faculty member who has submitted her tenure dossier. Many faculty members with PhDs are reluctant to pursue tenure track positions due to the expectations imposed by the Faculty of Medicine for tenure. Specifically, the emphasis on impact factor is more relevant for fundamental biomedical research. Clinical research related to occupational therapy is most appropriately published in occupational therapy or rehabilitation journals, which have low impact factors due to the limited number of published papers (and therefore citations) in the field. This needs to be addressed by the Dean of Medicine within the promotions committee. It may be helpful to have a representative from this Department and certainly from the School of Health Professions on the Promotions and Tenure Committee.
- 6.5 Technical and administrative staff is minimal to support these undergraduate and graduate programs. As part of the strategic plan, consideration of additional technical/secretarial support could be considered to alleviate faculty burden.

## **7. Infrastructure:**

- 7.1 The classrooms for the full class (60-65) are too small. This was clearly evident to us on tour and students also complained about this. These rooms are a fire and safety hazard. Students often sit on the floor as there is not adequate seating in the larger or the smaller (for group teaching) classrooms. It is the responsibility of the University to address this situation urgently, either by reducing student class size, by enlarging existing classrooms if feasible or finding new teaching spaces for the program.
- 7.2 We are under the impression that students would appreciate having learning spaces with computer stations to carry out independent learning and coursework while on campus. Possible additional workstations for independent learning should be considered, within the School and the library.
- 7.3 More office space for faculty will be needed, particularly since program is poised to grow.

## **8. Research:**

- 8.1 We recommend that the department reduce and consolidate Research Themes. The Research Themes identified in the Self-Evaluation report are too broad and numerous. We recommend faculty examine the Themes and select those that have sufficient scientific depth and funding to be maintained over time, paying careful attention to linking the Themes to interdisciplinary research teams. We recommend that the teams include faculty members at different ranks within and outside the Department. The revised list of Themes and related research teams can then be used to characterize the research opportunities available in the Department and advertise to potential doctoral students, research collaborators, and the general scientific community at the University and beyond.
- 8.2 We recommend that the Department of Occupational Therapy define the difference between Research and non-Research Tenure Track Faculty. The distinction between faculty with tenure track appointments and active, or emerging, research programs and those with a teaching focus needs to be clearly defined. Faculty members with expectations to develop funded research programs and publish in high quality refereed journals must be provided the appropriate time and resources to be successful. The practice at research intensive universities around the world is to protect the time of early career research faculty in the tenure track by reducing their teaching and committee requirements, usually for a period of three to five years.
- 8.3 We recommend that the Department of Occupational Therapy establish a formal Faculty Mentoring Program for early career tenure track faculty. Such a program might also be considered for junior non-tenure track faculty to help them define their career trajectory. There are many excellent models of mentoring programs available. Ideally, the program will include a team of two-three senior faculty members. They may be from outside the

Department or School. One mentor might be a person with expertise in the junior faculty member's area of research, and one might be senior person who would serve as a career mentor and provide feedback regarding promotion and tenure, time management, and general career advice.

- 8.4 We recommend that the Department of Occupational Therapy restructure the PhD and Master's Degree Programs. The PhD program is an excellent resource to build research infrastructure within the Department and School. As currently configured and operated, the PhD program is too small and narrowly focused to significantly add to the existing scientific environment. Creating an interdisciplinary PhD Program, similar to the rehabilitation sciences PhD in North America, would allow the program to recruit from a wider pool of potential PhD applicants (i.e., applicants from many disciplines) and will also create an opportunity to collaborate with senior faculty advisors from other departments at the University. In conjunction with restructuring the PhD Program, we also recommend that the Department restructure the Masters programs by targeting students who would complete the MS thesis and then track directly into the PhD program. The overall number of Master's degree students would be reduced and the number of students completing the combined MSc (thesis) and PhD would be increased. The restructuring of the PhD/MSc programs can be closely linked to the creation of the theme based research teams described above. Ideally, each of the interdisciplinary research teams would include at least one senior faculty member, early career faculty members and PhD students. Such a restructuring will create a critical mass of (interdisciplinary) investigators and improve the research team's productivity and ability to compete successfully for external funding.
- 8.5 We recommend that the Department of Occupational Therapy make any new tenure track position competitive by offering a package of expectations that are more like other research universities [e.g., 1-2 courses per semester and at least 50% time dedicated to research and writing].

**Signed by:**



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Prof. Winnie Dunn



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Prof. Annette Majnemer



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Prof. Kenneth J. Ottenbacher

## Appendix 1: Letter of Appointment



שר החינוך  
Minister of Education  
وزير التربية والتعليم

November, 2011

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

Dear Professor Dunn,

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

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

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

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

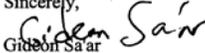
The composition of the Committee will be as follows: Prof. Winnie Dunn (Chair), Prof. Tal Jarus, Prof. Annette Majnemer and Prof. Kenneth J. Ottenbacher.

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

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

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

Sincerely,

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

Enclosures: Appendix to the Appointment Letter of Evaluation Committees

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

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**Wednesday, June 13, 2012, Tel Aviv University**

<b>Time</b>	<b>Subject</b>	<b>Participants</b>
09:30-10:00	Opening session with the heads of the institution and the senior staff member appointed to deal with quality assessment	<b>Prof. Aron Shai</b> , Rector <b>Prof. Dina Prialnik</b> , Vice Rector <b>Prof. David Horn</b> , Head, Academic Quality Assessment
10:00-10:30	Meeting with the Chair of the School of Health Professions	<b>Prof. Malka Ehrenfeld</b>
10:30-11:00	Meeting with the Chair of the Department of Occupational Therapy	<b>Nava Ratzon ,Ph.D</b>
11:00-11:30	Meeting with senior academic faculty	<b>Orit Bart ,Ph.D.</b> <b>Noga Ziv ,M.A</b> <b>Malka Itzkovitch ,M.A.</b> <b>Debbie Rand,Ph.D.</b>
11:30-12:00	Meeting with Junior Faculty*	<b>Michal Avrech-Bar,Ph.D.</b> <b>Limor Rosenberg, Ph.D</b> <b>Einat Ben Ari,Ph.D</b> <b>Lena Lipskaya ,Ph.D</b> <b>Margalit Pade ,Ph.D.</b> <b>Gila Rabinovitz, M.A.</b> <b>Ofra Shaham,Ph.D.</b>
12:00-12:40	Representatives of relevant departmental committees (teaching/curriculum committee, admissions committee, appointment committee)*	<b>Prof. Avi Weizman</b> The Master's Thesis Committee <b>Orit Bart, Ph.D.</b> The Curriculum Committee <b>Michal Avrech-Bar, Ph.D</b> The Curriculum Committee /PBT <b>Einat Ben Ari, Ph.D</b> The Undergraduate Admission Committee <b>Margalit Pade, Ph.D.</b> The Committee for Student Affairs <b>Debbie Rand, Ph.D.</b> The Graduate Admission Committee <b>Einat Olinky, M.A</b> The Committee for the Advancement of Students from Minority Groups
12:40-13:10	Tour of facilities: labs, classrooms, library *	<b>Yaffi Levanon, M.A</b> <b>Tal Zimanvoda, M.A.</b>

13:10-14:10	Closed working meeting & Lunch <b>(light lunch in meeting room)</b>	
14:10-14:55	Meeting with adjunct lecturers*	<b>Netta Benatur, Ph.D</b> <b>Pnina Weiss, M.A.</b> <b>Dorit Haim, M.A.</b> <b>Mira Gal, M.A.</b> <b>Tal Zimanvoda, M.A</b>
14:55-15:40	Meeting with clinical preceptors*	<b>Einat Olinky, M.A</b> <b>Yael Kaufman Cohen, M.A</b> <b>Sarah Gat, M.A</b> <b>Yoav Lurie, M.A.</b> <b>Yael Yaacoby, M.A.</b> <b>Debbie Lahav – Community</b> <b>Idida Boro – Geriatrics</b> <b>Liat Savag –Physical</b> <b>Orly Bar – Pediatrics</b> <b>Lisa Silverton – Pediatrics</b> <b>Lin Burtz – Psychiatry and Psychiatric rehabilitation</b>
15:40-16:10	Meeting with Ph.D. students	

**Thursday, June 14, 2012, Tel Aviv University**

<b>Time</b>	<b>Subject</b>	<b>Participants</b>
08:45 – 10:15	Tour of clinical sites (including travel time) BEIT LEVINSTEIN Achuza 278 Str., Raanana	Accompanied by <b>Sarha Averbuch &amp; Liat Peleg</b>
10:30 – 11:15	Tour of clinical sites (including travel time) BEIT IZI SHAPIRA Izi Shapira Str., Raanana	Accompanied by <b>Dina Kapel &amp; Noa Nizan</b>
12:00-13:00	Closed working meeting & Lunch ( <b>light lunch in meeting room</b> )	
13:00-13:45	Meeting with undergraduate students*  ***	
13:45-14:30	Meeting with master's students*  ***	
14:30-15:00	Summation meeting with Chair of the Department- Prof. Navah Ratzon	
14:30-15:00	Meeting with the Dean of the Faculty of Medicine***	<b>Prof. Yoseph Mekori, Dean</b>
15:00 -16:00	Closed working meeting	
16:00-16:45	Summation meeting with heads of institution, faculty, school and department	<b>Prof. Aron Shai, Rector</b> <b>Prof. Dina Prialnik, Vice Rector</b> <b>Prof. Yoseph Mekori, Dean</b> <b>Prof. Mali Erenfeld, Head of School</b> <b>Dr. Navah Ratzon, Head of Department</b> <b>Prof. David Horn, Head of Academic Quality Assessment</b>