Increasing Interprofessional Collaborative Competencies in OT Education

Whitney Lucas Molitor, OTD, OTR/L, BCG¹, Allison Naber, OTD, OTR/L, CLT-LANA¹, Angela MacCabe, DPT, PhD, USD², Julie Johnson, MD, USD²

¹University of South Dakota, Vermillion, SD, USA; ²Vermillion, SD, USA

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Primary Author and Speaker: Whitney Lucas Molitor, Whitney.LucasMolitor@usd.edu

Interprofessional education (IPE) occurs when two or more healthcare professional students learn with, from, and about each other to collaboratively improve health outcomes. Collaborative, interprofessional practice has been shown to increase patient satisfaction, increase safety, and decrease length of hospital stay. Variability currently exists regarding methods of incorporating IPE into occupational therapy curricula. Therefore, research is warranted to design and assess outcomes of IPE curricula in occupational therapy education. The purpose of this study was to discover differences in collaborative competencies among students in three professional health sciences programs following completion of an interprofessional course.

A convenience sample of students enrolled in an IPE course were included in this retrospective pre/post study. Data were gathered from the Interprofessional Collaborative Competencies Attainment Survey (ICCAS) a 20-item scale assessing communication, roles, team functioning, and collaboration. The Jefferson Interprofessional Observation Guide (JTOG) was used to assess team communication during a simulated video case, and lastly the Team STEPPS assessment reviewed items from the Team STEPPS modules including effective communication among teams. In total, 76 students from occupational therapy (n= 25), physical therapy (n= 26), and physician assistant (n= 25) programs participated in a course on interprofessional collaboration. Results were analyzed for those that completed pre/post assessment for each outcome measure. All 76 students complete the JTOG. Team STEPPS pre/post survey was completed by 71 students. Finally, the ICAAS was completed voluntarily by 37 participants.

Nearly 75% of respondents (n=53) agreed that Team STEPPS modules were valuable. A majority (n=65) reported an increase in knowledge regarding other professions as a results of interactions with students from a different discipline during this course. The JTOG, assessed after viewing and faculty led debrief of a simulated video case indicated students overwhelmingly agreed (n = 19) or strongly agreed (n= 46) that this component of the course increased their understanding regarding effective teamwork.

The ICCAS was introduced as an additional, but voluntary outcome tool. Pretest results indicated significant differences between OT and PT students regarding the item 'develop an effective care plan with Interprofessional team members' (F(2,36) = 11.07, p = .000). On this item average scores, which ranged from one (strongly agree) to seven (strongly disagree) indicated occupational therapy students were more neutral regarding their ability to develop effective plans with other members of the team ($M=4.33\pm.888$) as compared to PT ($M=5.92\pm.997$) and PA students ($M=5.18\pm.603$). At posttest, several statistically significant differences were noted between groups. Because of this the scale was collapsed and assessed for reliability, with internal consistency noted to be good ($\alpha=.955$). An ANOVA of the collapsed scale at posttest indicated (F(2,36) = 8.16, p = .001). This scale ranged from strongly disagree (20) to strongly agree (140). Differences were noted between OT ($M=117.7\pm12.9$), PT ($M=131.5\pm7.3$) and PA ($M=130.8\pm7.04$) students, indicating PT and PA students overall agreed more strongly regarding scale items than did OT students.

During fieldwork or clinical experiences during the same semester, 45% of students reported incorporating skills gained from this course into clinical experiences. Students participating in this course developed enhanced skills regarding working collaboratively with various members of the rehabilitation team. This study provides promising findings regarding implementation of IPE in OT education.

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