

Getting fit for practice: An innovative paediatric clinical placement provided physiotherapy students opportunities for skill development

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Abstract

Objectives Negative attitudes to disability among physiotherapy students in paediatric placements might be addressed by providing clinical placement opportunities for students early in their course. The aim of this qualitative research study was to explore what physiotherapy students reported learning from an innovative paediatric placement option.

Design Qualitative research with in-depth interviews.

Participants Seventeen first and second year physiotherapy students (15 women, 2 men; mean age 19.9 (SD 1.4) years) who took part in the clinical education experience.

Interventions The experience comprised a student-led progressive resistance training programme performed twice a week for 10 weeks at a community gymnasium with an adolescent with Down syndrome.

Methods In-depth interviews were completed after the 10-week programme and were audio-recorded, transcribed verbatim and independently coded by two researchers. Data were analysed using thematic analysis.

Results Two themes emerged from the data, one about being a student mentor and the second about skill development and application. The physiotherapy students indicated the programme was a challenging yet rewarding experience, and that they gained an increased appreciation of disability. They reported developing and applying a range of communication, professional and physiotherapy specific skills.

Conclusions The results suggest that the clinical experience provided physiotherapy students with opportunities to learn clinical skills, generic professional skills, and better understand disability in young people. Many of the learning outcomes identified by the participating students align with desired graduate capabilities and required professional competencies.

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Introduction

Attitudes of physiotherapy students towards people with disability are less positive than those of practising physiotherapists [1], or of occupational therapy students [2,3]. Given the importance of disability in paediatric rehabilitation [4], negative attitudes of physiotherapy students could be problematic in paediatric placements. For people with disability, negative attitudes of health professionals may pose a barrier to exercise [5,6], reduce the effectiveness of interventions [7] and influence areas of speciality in which physiotherapists practice.

Student attitudes towards disability might be improved by providing clinical placement opportunities for students. Physiotherapy employers identified a lack of paediatric and disability experience among recent graduates [8]. This may be due to difficulty in obtaining paediatric student placements. Lack of exposure to paediatrics during undergraduate training is a problem as a student's clinical experience may be a more powerful influence on their future career than university coursework or job availability [9].

To explore the influence of experience on attitudes towards disability, we designed a paediatric clinical placement to expose physiotherapy students to disability early in their course. We matched each student with an adolescent with Down syndrome and arranged for both to complete an exercise programme [10]. Adolescents with Down syndrome are

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typically sedentary, and often do not participate in recommended levels of physical activity [11]. This places them at risk of obesity [12] and Type II diabetes [13] and, therefore, they are an ideal group to encourage to exercise.

We undertook the following study to explore the self-reported learning outcomes of physiotherapy students. The research question was:

What did physiotherapy students report they learnt from participating in a paediatric clinical placement with young people with disability?

Method

Design

The framework underpinning this qualitative study was phenomenology. Phenomenology is the study of “the lived experience” [14], where events are described from the perspective of the person experiencing them [15]. We aimed to understand the experiences of physiotherapy students who volunteered to take part in a paediatric experience requiring them to exercise with adolescents with Down syndrome. Ethics approval was obtained from the University Human Ethics Committee, and all participants gave written informed consent prior to their participation.

Participants

Participants were first or second year physiotherapy students. The students were ‘mentors’ as they too had to complete the exercise programme, and to encourage equality in their relationships with the adolescents. The adolescents with Down syndrome (5 girls, 12 boys; mean age 15.8 years (SD1.6)) were recruited to participate in a randomised controlled trial on the effects of a progressive resistance training programme [10]. The students and adolescents were matched based on where they lived and, in some cases on gender.

The students were enrolled in the undergraduate physiotherapy programme at La Trobe University, Melbourne, Australia, a four-year Bachelor of Physiotherapy degree programme. During the first two years of this course, the students studied biological, medical and behavioural sciences, the theory and application of basic physiotherapy techniques and two paediatric subjects (one on child development and another on common paediatric conditions). The students also completed two one-week clinical observation placements.

Clinical experience programme

Each student and adolescent pair completed a 10-week, twice weekly progressive resistance training programme at their local community gymnasium, training according to guidelines for resistance training [16,17]. The training programme is described in detail elsewhere [10]. The research

team selected the gymnasium and liaised with gymnasium staff and students. All costs for gymnasium facilities were paid by research funding. Programme organisation was facilitated by the researchers’ previous experience in organising community-based exercise programmes for people with disability.

Students completed 2-h of training on programme content and progression, motivational and teaching strategies, and use of the gymnasium equipment. Students included the programme as part of their professional clinical experience. Throughout, each student kept a log book documenting the programme and had contact with the researchers every three weeks to ensure the programme was proceeding as planned.

In-depth interviews

After the programme, each student took part in an in-depth interview recorded using an Mp3 recording device. The interviewer was a physiotherapist experienced in conducting interviews and known to the participants as an academic staff member at the university. This allowed the interviewer to quickly establish rapport with the participants. The interviewer had no other contact with the students as part of the study. The interview began with a general question on the student’s experience and progressed to questions that explored their perceptions of learning outcomes (see [e-Appendix](#)). Open-ended questions were asked to allow the interviewer to establish the topic to be discussed without suggesting how the student was to respond [15]. Follow-up questions were used to get a student to elaborate on a response, to clarify any potential confusion about a response, or to expand a line of thought.

Data analysis

Interviews were transcribed verbatim and data examined using thematic analysis [15]. This ensured the resulting themes were derived from the data and were not pre-conceived. Transcripts were read several times by two researchers (AB, NS) independently to identify emerging concepts. NVivo software (Version 7, QSR international) was used to assist coding. After coding, through a consensus process, like concepts were grouped into subthemes, and these were drawn together to form themes. When the final list of themes was agreed, the transcripts were re-read to ensure no relevant aspect of these themes had been overlooked.

Rigour and trustworthiness

Research rigour was evaluated against the criteria of credibility, transferability, and dependability [15]. Credibility was enhanced as 17 out of a possible 19 eligible students participated, data were triangulated through multiple sources (face-to-face meetings, e-mail correspondence, exercise log books), more than one researcher coded the data and member checking of the initial themes generated by the researchers

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