



Impact of interprofessional peer teaching on physical and occupational therapy student's professional role identity



Kim Dunleavy, PT, PhD, OCS^a, Sujay Galen, PT, PhD, FHEA^b, Kristina Reid, PT, MPT^b, J. Patricia Dhar, MD^{c, d}, Rosanne DiZazzo-Miller, PhD, DrOT, OTRL, CDP^{b, *}

^a Physical Therapy Department, University of Florida, Gainesville, Florida, USA

^b Department of Health Care Sciences, Wayne State University, Detroit, MI, USA

^c College of Medicine, Central Michigan University, Mount Pleasant, MI, USA

^d School of Medicine, Wayne State University, Detroit, MI, USA

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ABSTRACT

Background/purpose: The importance of providing students with early interprofessional education (IPE) opportunities has been emphasized. However, there is limited information about the efficacy of instructional methods used to meet IPE competencies related to communicating professional roles and responsibilities or communication strategies in early experiences. This study describes an active learning peer teaching format where Physical Therapy (PT) and Occupational Therapy (OT) students introduced medical school students to their professional roles and responsibilities.

Methods: First-year PT ($n = 34$) and OT ($n = 14$) students taught rehabilitation assessments and interventions to second-year medical students as part of a Connective Tissue day. Student opinions of the experience were analyzed using qualitative thematic analysis of student written reflections.

Results: Students perceived the experience as valuable, satisfying, and relevant, and reported enhanced confidence and professional role identity.

Conclusion: Student-led IPE peer teaching is a feasible active learning opportunity that may be useful for meeting early IPE competencies, particularly those related to describing individual professional roles and responsibilities and communication skills. In addition, the experience resulted in clarifying the awareness of individual roles and the need for advocacy.

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Given the knowledge that health care team collaboration leads to optimal patient outcomes,^{1–6} it is the responsibility of educators to provide opportunities for students to develop into a “collaborative practice-ready” work force.⁷ The World Health Organization (WHO) defines interprofessional education as an experience where “students from two or more professions learn about, from and with each other, to enable effective collaboration and improve health outcomes.”⁷ Involving students from different professional healthcare programs provides the opportunity to engage in interprofessional socialization and learn from, and about each other.^{8–10}

Recent professional education accreditation standards suggest the importance of providing students with early interprofessional education (IPE) opportunities¹¹ with the aim of improving health

care student attitudes towards collaboration and teamwork.^{12–15} Even a single opportunity to learn collaboratively in an IPE setting significantly improves attitudes about IPE and is valued by students.⁹ There is, however, no agreement about which educational methods best introduces novice healthcare professionals to skills required for interprofessional practice.¹¹ There is also limited information about the efficacy of instructional methods used to introduce students to individual or team professional roles and responsibilities.

Active learning approaches are recommended when the goal is to increase student participation and motivation.^{16–22} One form of active learning, peer teaching, provides students with opportunities to develop both communication and interaction skills – skills necessary for a successful interprofessional teamwork – while providing exposure to other professions. The opportunity for students to teach peers about their professions during the formative phases of their professional identity development in an interactive format may be a useful approach to address selected interprofessional

* Corresponding author. Wayne State University, 259 Mack Avenue Suite 2212, Department of Health Sciences, Detroit, Michigan 48201, USA. Fax: +1 313 577 5822. E-mail address: ar7975@wayne.edu (R. DiZazzo-Miller).

competencies¹¹; specifically the ability related to communicate individual professional roles and responsibilities clearly to others and using appropriate communication strategies in a team setting.

Format

The format of this educational experience included presentations of each profession's scope of practice and interactive demonstrations in small groups. Physical therapy (PT), and occupational therapy (OT) students demonstrated and taught selected rehabilitation assessments and interventions to second-year medical students as part of a required Connective Tissue Unit. Each of the PT and OT sessions lasted approximately 30 min.

Target audience

First-year professional PT and OT students and second-year medical students were the target audience for this learning experience.

Objectives

There were five main objectives of the peer teaching experience for both PT and OT students. The first objective was to demonstrate beginning-level teaching skills and early confidence about teaching other professional students how to perform selected movement, gait and impairment tests and measures. The second was for students to be engaged in a discussion on the importance of explaining the extent and breadth of their professional scope of practice – including explaining rehabilitation assessments and interventions – to medical professionals. The next objective was to develop and demonstrate developing early interprofessional communication skills. The fourth was closely allied to the third, which included PTs and OTs discussing the importance of communication among medical professionals. The fifth objective involved developing individual professional role-identity within the context of interprofessional encounters. We anticipated that all objectives would be met as a natural consequence of students being placed in a supported peer teaching situation. These objectives directly addressed IPE core competencies focusing on (1) the importance of health care professionals' knowledge of roles and responsibilities and (2) competencies that focus on the importance of effective and appropriate interprofessional communication in order to promote and advance the health of populations.²³ Achievement of these objectives was assessed through student report as required by the PT and OT course instructors at the end of the IPE experience.

Activity description

Approximately 300 medical students rotated through multiple interactive stations, including PT and OT stations in different rooms. The 30 min sessions included a 5 min presentation on the scope of professional practice, referral mechanisms, educational background, and practice settings provided by PT and OT faculty, followed by interactive presentations delivered by the PT and OT students to the small groups of medical students in an open plan environment. Each PT and OT student interacted with approximately 20–30 medical students. PT students explained and demonstrated ambulation techniques, types of assistive devices and weight-bearing limitations, as well as standardized balance assessments. OT students demonstrated assessments, splinting and types of assistive technology appropriate for patients with rheumatology diagnoses.

Assessment

PT students were required to participate in this experience as part of a teaching and learning course; OT students participated to fulfill a service-learning requirement; and medical students were required to attend as part of the Rheumatology unit. Both OT and PT students were required to submit a reflection after the experience. PT students were asked to provide five bullet points on their perceptions of the IPE teaching experience, while OT students were asked to describe, examine and, articulate learning from the experience using the DEAL model (**D**escribe, **E**xamine, and **A**rticulate **L**earning) developed to promote critical reflection of service learning opportunities.²⁴ This model asks students to reflect on the experience from personal, civic and academic perspectives. Institutional Review Board approval was obtained for retrospective qualitative analysis of the data.

Thematic analysis of reflections was conducted using open coding with IBM SPSS text analytics for Surveys to extract student perceptions of the experience. Data were funneled for interpretation while searching for meaning. The initial analysis was followed by directed content analysis to explore the extent to which the active learning experience was considered motivating. The extent to which students appreciate and are motivated by instructional design reflects the impact of the educational method. A model described by Keller 2007,²⁵ outlines the subcomponents of instruction used to motivate learners, which include the following: gaining **A**ttention, providing **R**elevant instruction, offering opportunities to develop **C**onfidence and building **S**atisfaction (ARCS model).^{25–27} The ARCS model was used to reflect the impact of the experience.

Data were initially searched for terms consistent with 1) inter-professional communication and interaction 2) professional role identity, and 3) ARCS motivational model subcategories: (Attention, Confidence, Relevance, and Satisfaction). See [Table 1](#) for definition of terms. Secondary data checks were conducted simultaneously by two authors using line by line coding until agreement related to data fit with content category was reached. This was followed by confirmatory analysis by two additional authors who provided consensus building when there was no agreement.

Evaluation

Major themes included awareness of gaps in medical student knowledge of PT and OT professional scope and roles, the importance of advocacy and need to teach others about their own professions and developing professional identity (see [Table 2](#)).

Table 1
Definition of terms used throughout data analysis.

Terms	Definitions
Interprofessional education	Learning related to professional role, group skills, communication skills, conflict resolution skills, and leadership ²⁸
Professional role identity	Characteristics of physical therapist or occupational therapist professional roles such as pride or ownership or the development of understanding of roles.
Motivation	Enthusiasm, involvement, and sense of purpose.
Attention	Students' attention to the learning experience, awareness, and interest.
Confidence	Development of poise, assurance, self-reliance in skills and communication.
Relevance	Significance, importance or consequence for future or present learning or practice
Satisfaction	Students' expression of fulfillment or enjoyment with performance or outcomes associated with the experience.

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