

"What's the Difference Between Occupational Therapy and Physical Therapy?" How a Student-Led Inter-Professional Outreach Clinic Addresses This Question

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Introduction

Background: Historically, the delineation between Occupational and Physical Therapy (OT and PT) practice roles has been a source of misperception. Confusion between OT and PT scope of practice becomes readily evident in collaborative learning environments, such as at the Indiana University Student Outreach Clinic (IU SOC); a student-led interprofessional probono clinic in Indianapolis, IN.

Problem: Clearly defining and communicating the roles of OT and PT for allocation of patients with various conditions has presented a challenge in this setting. The value of interprofessional education (IPE) is evident in the literature; however, limited research exists discussing the impact of pro bono clinical work on student understanding of professional roles.

Purpose: The purpose of this study is to examine student perceptions about the differences and similarities between Occupational and Physical Therapy. The study also aims to determine students' readiness to participate in interprofessional education (IPE) activities that will occur between the graduate programs, primarily through student participation at IUSOC



Outcomes

Quantitative Results: IU SOC OT PT IPEP Pre-Post Indicate the extent of your knowledge about the educational requirements of: Indicate the extent for your knowledge about the scope of practice, in general of: Indicate the extent of your knowledge about the scope of practice specifically at IUSOC of: Indicate the extent you are <u>comfortable discussing the differences</u> in the scope of practice of Indicate the extent of your understanding the importance of Interprofessional Education and the highest quality of care. n = 75 (97.4% response rate)

Qualitative Results: Changes in Misconceptions and Biases



Consensus Document & Online Training Module



Revised May 2015

t Video Survey Responses						
	OT		PT			
	Pre	Post	Pre	Post		
	Aver: 2.8	Aver: 2.96	Aver: 3.16	Aver: 3.23		
	SD: 1.06	SD: 2.96	SD: 1.12	SD: 0.99		
		<i>p</i> <0.09		p< 0.40		
	Aver: 2.48	Aver: 3.25	Aver: 2.63	Aver: 3.43		
	SD: 1.11	SD: 0.62	SD: 1.26	SD:0.77		
		p<0.000		p< 0.000		
	Aver: 1.16	Aver: 3.16	Aver: 1.15	Aver: 3.15		
	SD: 1.04	SD: 0.77	SD: 1.04	SD:0.82		
		p<0.000		p< 0.000		
of:	Aver: 2.23	Aver: 3.05	Aver: 2.21	Aver: 3.15		
	SD: 1.05	SD: 0.81	SD: 1.18	SD:0.85		
		<i>p</i> <0.000		p< 0.000		
and Practice to deliver	Pre: Aver: 2.9	5 Post: Aver:	3.79			
	SD: 0.84 SD: 0.41					
	<i>p</i> < 0.000					

Post Video

"Occupational therapy is aimed towards giving the client a better understanding of their functional capabilities and how they can manage their health in a better way.....Physical therapy focuses on treating the actual injury of a patient that directly affects him physically and preventing further injury".

"Physical therapy looks to treat the actual impairment of the patient...while Occupational therapy helps the patient complete necessary everyday tasks with the impairment...."

"These practices are very similar. Both work to improve function in clients and can see clients for similar problems, but the types of interventions used vary."

IUSOC Occupational Therapy (OT) & Physical Therapy (PT) Consensus Document

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n,	<u>Goal of OT at IUSOC</u> : To enhance individual's performance, throughout the lifespan, within areas of	At IUSOC we strive to determine what treatment is appropriate by patient outcome goals rather than simply by the location of the injury or diagnosis.
	occupation including: activities of daily living (ADLs), Instrumental activities of daily living	Examples of Diagnoses that can be seen by both professions:
	(IADLs), rest and sleep, education, work, play,	Diabetes or Hypertension
	leisure and social participation for a variety of neuromuscular, musculoskeletal, cognitive and	OT role:
ular	psychosocial conditions.	OT interventions address difficulty with administering medication as prescribed, or who need lifestyle changes for full activity/occupation participation.
ulai	Evaluation skills:	
	Occupational profile, including:	PT role:
	Obtain client:	PT interventions can help patients decrease medication needs or improve management through
	 Roles (worker, parent, etc.) 	exercise prescription and self-care training and education.
	o Interests	Arthritis
	 Patterns of living (habits) 	OT role:
tion	 Values, Needs, Strengths 	OT interventions help modify occupational performance to increase function when patient is experiencing symptoms of arthritis through the implementation of physical agent modalities, home
	 Analysis of occupational performance: 	exercise plans, adaptive equipment, ergonomic education, and energy conservation.
	 Observe occupational 	
ces	performance (function,	<u>PT role:</u>
3	movement, cognition) to	PT interventions can help slow the progression and manage symptoms through individualized exercise prescription, manual therapy, stretching, postural education, and energy conservation
n	consider supports and barriers	training.
	Treatment skills:	
	Education and training in:	Back Pain
	 Medication management 	OT role:
	Smoking cessation	OT interventions aim to manage patient symptoms through occupation modifications, ergonomics, and education on healthy lifestyles, stress management and work simulation to assess or modify
	Sleep hygiene	client's ability to return to employment.
	 Self-care management 	
	 Home management 	<u>PT role:</u>
	Workplace or community reintegration	Differential diagnosis of back pain and treatment such as exercise prescription, and manual therapy to decrease or alleviate symptoms and education regarding posture and body mechanics that may
	Adaptive strategies for functional	exacerbate or improve symptoms.
ne	independence through:	Carpal Tunnel
ot	 Assistive technology 	<u>OT role:</u>
01	Adaptive devices	OT interventions help prevent exacerbation of symptoms during occupational performance and
	 Energy conservation 	improve function when symptoms are present through splinting, ergonomics, and adaptive
	Ergonomics	equipment.
	 Modalities as indicated 	
	 Splinting for joint protection, 	<u>PT role:</u> Conservative treatment of symptoms and the cause of the carpal tunnel to reduce or alleviate
	mobilization, and improved	symptoms and education on long term management through proper body mechanics and exercise
	occupational performance	prescription.
		Revised May 2015



Methods

A consensus document on OT and PT education and scope of practice and a video highlighting the delineation of roles and collaborative practice at the IU SOC were developed by OT and PT student board members and faculty advisors. Within a month of program entry, 1st year students in the OT and PT programs were asked to review the document and video as an ungraded class assignment. Pre-post survey data was collected, including the Attitudes Towards Health Care Teams² and a Likert scale developed to explore student knowledge of OT and PT professions' educational background and scope of practice.

Discussion & Conclusion

Quantitative and qualitative results indicate the benefits of utilizing an IPE approach, in conjunction with an online training module, and a consensus document to illustrate the different scopes of practice between OT and PT professions. First year OT and PT graduate professional students demonstrated:

- significantly improved understanding of the general scope of practices among both professions,
- significantly improved knowledge regarding the scope of practice among OT and PT at the IU Student Outreach Clinic,
- significantly improved comfort discussing the differences in the scope of practices,
- * significantly improved recognition to the importance of IPEP to deliver the highest quality of care regardless of one's profession

The results support utilization of IPE approaches early in graduate health professional education to enhance students' understanding of role delineation and collaborative practice. Using an online training module enriches preparation to participate within a collaborative learning environment such as at the Indiana University Student Outreach Clinic.

References

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