

Occupational Therapy (OT) and Nursing Student Collaboration in a Simulated Home Care Experience

Terrienne Jones, PhD, OTR/L ; Laura Sopeth, MA, OTR/L ; Mary Rowan, PhD, RN . University of Minnesota, Minneapolis, Minnesota

Program in Occupational Therapy



BACKGROUND

Interprofessional education (IPE) has become a new standard in the academic experience of health care students in preparation for their future work on healthcare teams ¹. Both the nursing and OT professions value IPE as well. ^{2,3} In clinical practice, collaboration often happens between team members who know little about each other personally. Experiences during the didactic curriculum designed to foster the ability of students to interact collaboratively and adeptly with others with whom they have little or no experience are valuable to develop team skills and help achieve client centered care.

PURPOSE AND QUESTIONS

The purpose of this inter-professional learning activity was to create a simulated experience where students from different professional programs who did not know each other would have to collaborate in a practice context where the client is ‘in charge’. Further, the experience was also created to provide opportunities for both immediate feedback and reflection on the interactions between both groups of students. Therefore, the questions guiding this experience were:
(1) Will students gain a greater understanding of both their own role and the role of the other profession and (2) value the role of interprofessional collaboration, while interacting in a simulated client driven learning scenario?

METHOD

The experience was conducted in the home environment labs of the Bentson Healthy Communities Innovation Center in the School of Nursing at the University of MN. Comparably prepared OT and nursing students were grouped, then engaged in a home visit with a complex stroke patient following an acute rehab episode. Students were given the case just prior to the experience and were pre-assigned roles of nurse/therapist and also observer. The experience included a pre-visit huddle so students could together decide on a plan for the visit; a ‘pause’ halfway for further collaboration, problem solving and the switching of roles; then ended with a large group discussion. Pre and post survey data was collected.

RESULTS

Survey data was analyzed using paired sample t-tests to determine changes in knowledge of roles; confidence in roles; perception of skills needed to work in a person’s home; and understanding of the value of interprofessional collaboration between the two groups. Significant findings are below (p<.05).

Survey Outcomes for PRE and POST Experience Groups Separated by Profession				
		PRE	POST	p
Δ Knowledge of own role	Nursing	3.43 (.77)	3.90 (.73)	0.003
	OT	3.45 (.78)	4.03 (.86)	0.005
Δ Knowledge of the other’s role	Nursing (of OT)	2.63 (0.82)	3.90 (0.73)	0.0001
	OT (of Nursing)	2.70 (.88)	3.63 (.95)	0.0001
Δ Understanding of value of interprofessional collaboration	Nursing	4.15 (0.82)	4.56 (.62)	0.004
	OT	4.15 (.75)	4.18 (.90)	1.0

Note. Standard deviations appear in parenthesis beneath means. Nursing N=60. OT N=40

“I learned how OT and nursing had some overlap in roles yet are very different in other aspects.” (Nursing)

“This forced us to think on our feet and respond to realistic issues that arose.” (OT)



“It was good to sit down with OT students and find out from them how they approach their profession.”(Nursing)

“Working with nursing students also helped me to think through role delineation and how interprofessional collaboration could be established.” (OT)

DISCUSSION

Faculty reflection on the experience was that although this interprofessional learning activity was labor intensive to both create and deliver, the impact on student learning was of high value and worth replicating now that the experience has been piloted successfully. Much of the success of orchestration of the experience was due to a high level of detailed planning so that each student knew exactly where to be, what was expected of them in each role and how much time they had to accomplish their tasks. Two faculty served as the standardized patient and played the role very consistently. In addition, the home labs were set up to mimic a real home environment, complete with clutter, numerus pill bottles and other personal items. Students made many comments about how real the experience felt and how this positively impacted learning.



SELECTED REFERENCES

1. Interprofessional Education Collaborative. (2016), *Core competencies for interprofessional collaborative practice; 2016 update*. Washington, DC; Interprofessional Education Collaborative.
2. Pfaff, K., Baxter, P., Jack, S., & Ploeg, J. (2014). An integrative review of the factors influencing new graduate nurse engagement in interprofessional collaboration. *Journal of advanced nursing*, 70(1), 4-20.
3. CMCP, C. (2015). Importance of interprofessional education in occupational therapy curricula. *The American Journal of Occupational Therapy*, 69, 1.



