Winter 1-2019

Using the Backward Design Process to Integrate Interprofessional Education Utilizing Simulation in OT and PT Educational Curricula

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Using the Backward Design Process to Integrate Interprofessional Education Utilizing Simulation in OT and PT Educational Curricula

Presenters:
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Course Objectives

1. Identify various obstacles to implementation of interprofessional education (IPE).

2. Discuss how to use the Backward Design Process for implementing IPE simulation to align with discipline-specific accreditation standards, institutional, programmatic, and course learning objectives.

3. Understand the benefits of creating IPE simulation by using the Backwards Design Process.

4. Discuss future implementations promoting IPE simulation in health science education.
Obstacles During IPE Simulation Implementation

1. Persistent separation of education
2. Diverse training techniques
3. Remote access to simulation resources
4. Scheduling conflicts

(Wilson & Whitman-Price, 2015)

Center for Innovative Clinical Practice

- IP Learning
- IP Collaboration
- IP Reflection

(Montgomery, Morse, Smith-Glasgow, Posmontier, & Follen, 2012)
Integrating IPE Simulation in OT and PT Curricula

Health Science Courses
- Technical skills
- Communication skills
- Scaffolded learning introduction, applied, mastery

The Backward Design Process

1. Identifying desired results
   - Curriculum expectations
   - Course learning objectives

2. Determine acceptable evidence
   - Formative assessments
   - Summative assessments

3. Plan learning experiences and Instructions
   - Scaffolding
   - Teaching methods

(Wiggins and McTighe, 2014)
The Backward Design Process for IPE Simulation

Accreditation

Institution

Program

Course

Simulation

Accreditation Standards

ACOTE

Standard B.5.21

Effectively communicate and work interprofessionally with those who provide services to individuals, organizations, and/or populations in order to clarify each member’s responsibility in executing an intervention plan.

CAPTE

Standard 6F

The didactic and clinical curriculum includes interprofessional education; learning activities are directed toward the development of interprofessional competencies including, but not limited to: values/ethics, communication, professional roles and responsibilities, and teamwork.
Institutional Learning Objectives

Mission Statement

The mission of the University of St. Augustine for Health Sciences is the development of professional health care practitioners through innovative, individualized, and quality classroom, clinical, and distance education.

Institutional Learning Objectives

- Apply an interdisciplinary approach to solving problems
  - Foster respect in the values and roles of interdisciplinary professionals
  - Determine the need for interdisciplinary collaboration
  - Practice interdisciplinary teamwork and communication
  - Recognize self-limitations and need for referral

Program Learning Objectives (PLO)

- **OT PLO**
  - Advocate for the profession of occupational therapy while collaborating with other members of the health care team.
  - Ensure optimal and culturally competent verbal and written communication of occupational therapy.
  - Use effective leadership skills to advance the role of occupational therapy

- **PT PLO**
  - Practice physical therapy in a manner that supports cooperative relationships with patients/clients, other health care providers, and the community.

Course Learning Objectives (CLO)

- **CLO # 4**
  - Exhibit effective and professional communication with simulated patients and interdisciplinary classmates
Simulation Learning Objectives (SLO)

- Explain the roles of OT and PT
- Collaborate between OT and PT
- Demonstrate verbal and non-verbal communication

Simulation Learning Experience

1. Discipline-Specific Training
2. Pre-Briefing & OT/PT Communicate to Formulate a Plan
3. Collaborate in Simulation
4. Debrief
5. Reflection Assignment
Reflection Assignment

What does it mean to collaborate inter-professionally with other members of the healthcare team? Provide some examples experienced in the course? How does this translate into clinical practice? Provide examples.

Future Implementation of IPE and Simulation

1. Addition of new programs
2. Development of medically complex patients and requiring critical thinking and technical skills
3. Scaffolding IPE and simulation throughout the curriculum
4. Potential stand-alone IPE and simulation course for all programs
5. Expand into asynchronous simulations with on-line debriefing
6. Research standardized assessment tools for IPE simulation

### IPEC Core Competencies

<table>
<thead>
<tr>
<th>Values/Ethics for Interprofessional Practice</th>
<th>Roles and Responsibilities</th>
<th>Interprofessional Communication</th>
<th>Teams and Teamwork</th>
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### References


