Interdisciplinary Learning During Fieldwork

Debra Hanson

Health care is rarely provided by only one profession or one professional working in isolation; typically, it's an interdisciplinary process. By extension, education within health care, including Level II fieldwork, also benefits from interprofessional learning opportunities.

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For example, DVD simulations may be a helpful tool to promote student learning. Simulations developed by academic staff from four health disciplines and then trialed and evaluated by undergraduate paramedic, occupational therapy, physiotherapy, and nursing students were valuable for promoting health care as an integrated interdisciplinary system, according to survey results from 394 students.[1] Focus group data involving 24 students supported the value of simulations for generating interest, concern, and awareness of other health care professionals. The students noted, however, that simulations, although valuable, cannot replace the hands-on, real-life experience of clinical placements.

POSITIVE ROLE MODELS

Pollard, in a recent qualitative research study, underscored the value of positive role modeling of interdisciplinary relationships by health care professionals, particularly senior staff.[2] The results of semi-structured interviews conducted with 52 students from 10 health and social care professions demonstrated that students are highly influenced by non-formal learning and unconscious role modeling as they develop attitudinal and behavioral skills for interdisciplinary interactions. Students in this study were often unaware of organizational systems within the facility that supported or detracted from interprofessional collaboration. Instead, they rated the quality of interprofessional interactions within the facility based on observed interpersonal communications between disciplines and appeared to view problems with interprofessional behaviors, when observed, as normal features of the setting.

INTERDISCIPLINARY LEARNING

Precin described the use of an aggregate fieldwork model in which students from the disciplines of nursing, social work, occupational therapy, psychology, and medicine participated in interdisciplinary training and intervention sessions.[3] Weekly 3-hour interdisciplinary seminars allowed students from all disciplines in an inpatient psychiatric training hospital to explore topics of mutual interest and to orient new staff and interns to professional roles within the facility. Interventions were provided through interdisciplinary groups and individualized interdisciplinary collaboration. For example, occupational therapists worked with the nursing staff to set up individualized cognitive compensation strategies to enable medication compliance.

In the Precin study, 95% of staff surveyed believed the value of occupational therapy services that clients received justified the time and effort spent on interdisciplinary training. Students indicated in weekly logs that because of their participation in the aggregate learning model, they were more likely to take the initiative in approaching other disciplines with questions and pursue interdisciplinary problem solving. Verbal reports by students indicated that positive feedback from other disciplines reinforced professional credibility and helped them critically reflect on their professional role.

STRONGER PROFESSIONAL IDENTITY

In-depth interviews with five Level II occupational therapy students from three different Midwestern universities revealed that the value and recognition given to occupational therapy by other health care professionals has a powerful effect on students' development of professional identity.[4] When occupational therapists work in a cohesive manner within the treatment

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in leaders with greater competence than would have otherwise been developed. Additionally, working as tri-leaders furthered the extent to which we were able to interpret our actions and apply group theory to our work. By attending to the tri-leadership group in terms of communication, dynamics, leadership styles, and leader functions, this model for leadership and learning can considerably enhance the group experience for all parties involved. ■

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team, other health care professionals better understand the scope of occupational therapy practice, making it easier for students to transition into the professional community. Conversely, students said they felt lost when they worked in departments where teamwork was not highly valued or demonstrated.

Students who were able to demonstrate work behaviors valued by the treatment team early in the fieldwork also engendered recognition and value for the occupational therapy profession by other health care providers. Assignments such as in-services allowed students to share expertise and identity with other health care professions, reinforcing awareness of occupational therapy's unique contributions to the professional community. Students appreciated constructive feedback from supervisors regarding role expertise and the opportunity to dicuss situations related to interprofessional relationships. Findings support the value of mentorship directed at negotiating learning processes and working pressures within a community of practice. ■

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reflected on the similarity between this process and how the team at school develops a student's individualized education program. In keeping with this concept, she checked each goal for a clear criterion/outcome statement and ensured that appropriate supports would be available to make it feasible to meet her goals within the next 5 years.

Sharon did a final reading of her application and checked: that her narrative reflections clearly explained why the evidence provided demonstrated the intent of the competency; that she had sufficient documentation for meeting all the criteria listed for each competency; that connections were clear between the self-assessment and the competencies; and that the goals in her plan reflected the self-assessment and were measureable, with clear methods identified to achieve these goals.

Sharon had completed the application over a 5-month period and in the process was able to clearly identify her growth as a professional and her current strengths, and to develop a plan to obtain new skills to serve her clients. She realized that her skills as a practitioner had changed substantially over the past 9 years, and completing the BCP application helped her feel more confident and prepared to demonstrate her level of expertise to administrators and others. ■

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