

Promoting Self-Efficacy in Physical Therapy Students by Providing Burnout Prevention Education

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Problem

- Physical therapy (PT) students are provided comprehensive learning opportunities that prepare them for clinical practice, but are they prepared to properly manage career-related stresses?
- Clinician burnout is prevalent among physical therapists (PTs) and may impair their ability to provide the highest standard of patient care
- This may contribute to deficiencies in healthcare system operations and population health outcomes



Purpose

The purpose of this project was to use evidence-based strategies to address concerns of future burnout for physical therapy students in the classroom setting prior to transition to the clinical setting to improve general self-efficacy



Available Knowledge: Presence of Burnout

- Burnout has demonstrated significant impact on PT clinicians, healthcare organizations, and population health
- Addressing clinician burnout is a key factor in driving optimization of healthcare system performance
- Factors contributing to burnout:
 - Elevated billing and productivity expectations without proper incentivization
 - Malalignment of individual values and ethics with those of the workplace
 - Emotional exhaustion associated with employment stressors
 - Insufficient education, support, or mentorship

Available Knowledge: Burnout Prevention & Education

- Burnout prevention strategies:
 - Well-being programs & practices (such as mindfulness, meditation, yoga, acupuncture, gratitude journaling, psychoeducation)
 - Organization-provided mentorship, education, support
- PT students can improve self-efficacy through participation in educational experiences when provided adequate contact hours
- Burnout prevention education integrated into social work student curriculum has demonstrated effectiveness to promote detection of burnout, utilization of self-care strategies, & improved mental health
- A resilience educational intervention provided to PT students has been shown to enhance resilience and positive emotions

Rationale

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graph TD; Plan[Plan: Literature review, select outcome tool, prepare materials, schedule session, notify potential participants] --> Do[Do: Administer survey tool, conduct educational session, re-administer survey tool]; Do --> Study[Study: Statistical analysis of findings from outcome tool, determination of success of intervention]; Study --> Act[Act: Consider changes to education content or delivery method for future improvement as well as integration into health professional curriculums]; Act --> Plan;
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Plan: Literature review, select outcome tool, prepare materials, schedule session, notify potential participants

Do: Administer survey tool, conduct educational session, re-administer survey tool

Study: Statistical analysis of findings from outcome tool, determination of success of intervention

Act: Consider changes to education content or delivery method for future improvement as well as integration into health professional curriculums

Methods

- Context
 - Target population of PT students within a Doctor of Physical Therapy (DPT) program housed within a School of Health Sciences at a mid-sized public university in the US
 - Program consists of 3 years of academic preparation
- Intervention
 - Burnout prevention education session comprised of lecture presentation, group case studies, individual reflections with live polling, and debriefing
- Study of Intervention
 - Survey tool administered pre and post intervention

Methods:

Education Session Components

1. Lecture Presentation: Explanation of burnout and prevalence, burnout contributing/alleviating factors, strategies for prevention/mitigation
2. Group Case Studies: PT clinician burnout scenarios accompanied by discussion questions
3. Individual Reflections with Live Polling: Preferred burnout prevention/mitigation strategies and priorities in seeking desirable healthcare workplaces
4. Debriefing: Share new insights and perspectives, reflect on case studies, interpret polling responses

Measures and Data Analysis

- Measures
 - General Self-Efficacy Scale (GSES)
 - Valid and reliable survey tool to assess perceived self-efficacy
 - 10 Likert-style questions, final scores range 10 to 40 with higher scores indicating better self-efficacy
- Data Analysis
 - Paired / dependent t -test utilized to determine change in survey outcome tool from pre to post intervention

Results

- 53 total participants
- Pre-intervention scores: $M = 30.89$, $SD = 3.48$, $N = 53$
- Post-intervention scores: $M = 33.91$, $SD = 3.63$, $N = 53$
- Paired t -test: $t = -6.31$, $p < .001$, $df = 52$
- Increase in mean score of 3.02



Discussion

- Statistically significant increase in self-efficacy among DPT students from pre to post implementation of a burnout prevention education session
- Utility of this education experience to equip DPT students with the knowledge and tools needed to establish enhanced self-efficacy while preparing them to prevent and mitigate burnout



Conclusions

- DPT programs should consider incorporation of burnout prevention education into their curriculums
- Future research should consider integration of burnout prevention education with students from other healthcare disciplines
- If students across disciplines can transition into clinical practice with enhanced self-efficacy and preparation to prevent burnout, they may contribute to improved clinical care and healthcare system operations

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Image Sources

- Slide 3: <https://www.rxnt.com/how-healthcare-organizations-can-identify-and-resolve-employee-burnout/?srsId=AfmBOopZ99txN4WPww20AT8u1-l4R2oR8g8RiP5jNVhxehtV6dFiY32J>
- Slide 4: <https://www.herzing.edu/blog/elevating-each-other-how-healthcare-professionals-collaborate-across-fields>
- Slide 11: <https://www.herzing.edu/degree/data-analytics>
- Slide 12: <https://touchette.org/services/physical-therapy>