

Perspectives on

Curriculum Reform & Evaluation

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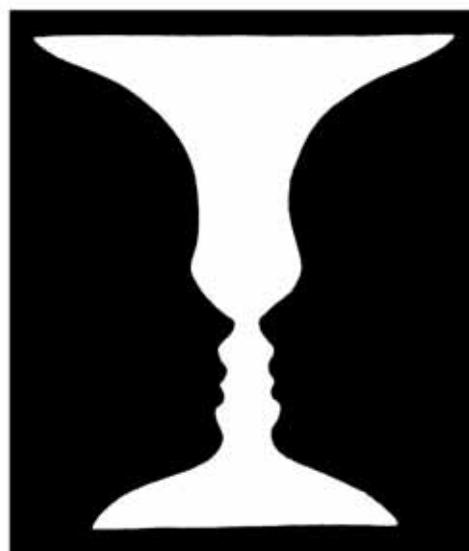


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Perspectives:

- on health,
 - on the health and educational systems,
 - on the adequacy (or not) of the training, education, and competencies of practitioners
- depend very much on the personal perspective*



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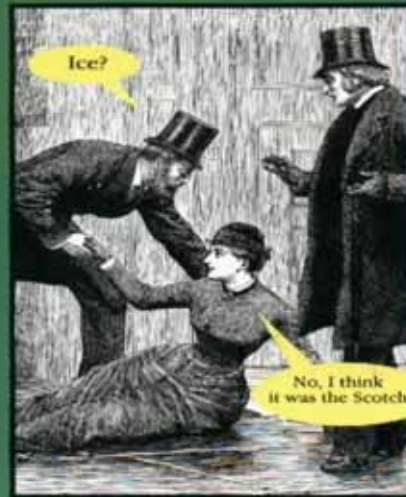
Patient (student) centered

What does that mean?

Different things to:
different people,
different professions,
and to
different patients

Outcomes based

What outcome?
When, who and what
should be measured?



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Background Context

- Personal
 - PT Clinician
 - UK, Canada, USA
 - Patient
 - UK, Canada, USA, (Japan)
 - Academic
 - UK, USA, Canada (entry level Diploma, BSc, MSc, Doctorate)
 - Research area
 - Pain

As a patient → the most profound (life-changing experiences)

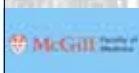


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Improving Health & Health Care

- **Curriculum & clinical practice**
 - Mission statements
 - Lifelong and self-directed learners → evidence?
 - Curriculum e.g. assignments
 - Transfer to clinic? → evidence?
 - Patient centered decision making? → evidence?
 - **Drivers of curriculum (Direct & indirect)**
 - Science, the body of knowledge and skill base
 - Accreditation and Licensing bodies
 - Professional Associations
 - Clinicians ('street credibility')
 - **Policy makers and payers**
 - **Patients**



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Effectiveness of... or need for curriculum reform



“The most telling evidence is likely to be gathered from the bottom up, not top-down”.

Therefore need to look at what is happening within health care



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Pain as an Exemplar

Pain and the resulting physical dysfunction - most frequent reasons that patients seek medical care.

But

Persistent evidence - inadequacy of practitioners knowledge or even awareness of pain

- 47% of all chronic-pain sufferers surveyed had changed doctors at least once.
- 29% had switched physicians three or more times.

Reasons for a new doctor?

- last physician did not know a lot about pain treatment (31%),
- belief that their doctor didn't take their pain seriously enough (29%)

Pain as an Exemplar

European and International Pain Societies and Health Care Policy Makers

Raise awareness Global Health Care problem

JCAHO Accreditation Standards & Patient Rights

Veterans Affairs (USA) Pain: the 5th Vital Sign

State Mandate (Texas)

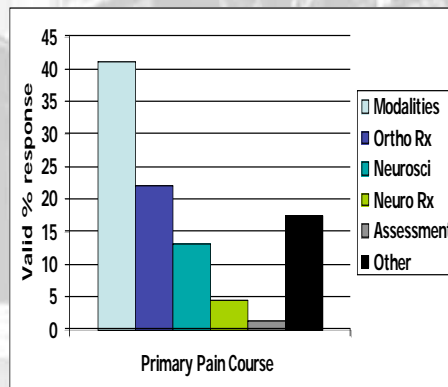
Review Pain in ***all*** medical curricula

Canada (Federal and Provincial Initiatives)



PT Faculty Survey, Primary Pain Course n=169 Schools

- Mode 4 hours
– (in modalities course)
- Faculty perceptions
- **PT Students very well prepared to assess and manage acute and chronic pain**



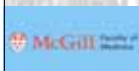
Scudds, Scudds & Simmonds



Evidence Based Practice

- Survey of Clinicians
 - Personal practice
 - Approx 80% best evidence based
 - Colleagues in same facility
 - Approx 50% best evidence based
 - Practitioners in general
 - Approx 25% best evidence based

Changing behaviors, Cognitive-behavioral approach



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Evidence based Curriculum and Clinical Practice

- 15 year gap exists between research findings and their implementation in practice (Pallen and Timmins, 2002).
But
- Some interventions are embraced way ahead of the supporting science.
- What characterizes early or delayed implementation?



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Practice & Curriculum Drivers (Consider: evidence driven or..?)

- Research, the body of knowledge and skill base
- Accreditation and Licensing bodies
- Clinical practice & professional
 - (including type of degree)
- Policy makers, payers, and grant agencies
- Patients
 - (newspapers, TV campaigns, etc)
- The Science of Knowledge Translation

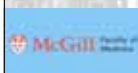


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Knowledge Translation

- *Knowledge translation is the **exchange, synthesis and ethically-sound application of knowledge** - within a complex system of interactions among **researchers and users** - to accelerate the capture of the benefits of research for Canadians through improved health, more effective services and products, and a strengthened health care system*



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Curriculum Reform & Evaluation

“The most telling evidence is likely to be gathered from the bottom up, not top-down”.

***Level of degree
Curricular content and delivery method
e.g. Traditional, PBL, Case-based, IPL***

So, look at what is happening within health care to determine the need for and effectiveness of curriculum reform



Thank you!



Science for a better world
Occupational Therapy



CR/R