

Self-Directed Learning with Oral Examination of Clinical Reasoning

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Introduction

A challenge in OT education is guiding students to go beyond what is presented in a course to develop skills essential for lifelong learning. A method for addressing this challenge is to implement self-directed learning (SDL) with students.

- SDL is required for success on level II fieldwork. However, waiting until fieldwork to develop SDL may contribute to challenges in being successful during fieldwork (Grenier, 2015).
- Through SDL, students take responsibility for learning based on their specific learning needs.
- Acquiring SDL skills must be facilitated by faculty; it should not be assumed that all students possess skills needed to be successful with SDL (Hill et al., 2020).
- Most studies focus on student perception and satisfaction of SDL; limited research identifies educational outcomes (Murad & Varkey, 2008).

Purpose of Project

- Explore implementation of SDL with first year OT students in a semester-long experience with summative outcome measure through the Structured Oral Self-Directed Learning Examination (SOSLE):
 - Simulates a clinical situation and provides objective assessment of SDL skills.
 - Replicates the clinical reasoning process as well as requires students to generate learning issues specific to themselves (Chapman & Westmorland, 1993; Manterola et al, p. 373).
- Aims of the project
 - Analyze student objective SDL readiness at the start of the semester through SOSLE assessment and self-reflection
 - Compare student self-assessment and faculty assessment of the SOSLE

Methods

Self-Directed Learning (SDL) Readiness Scale (at start of semester)

- 3 subscales (Fisher, King, & Tague, 2001):
 - self-management
 - desire for learning
 - self-control
- strong internal consistency reliability for total items
- reasonable construct validity for the subscales (Fisher & King, 2010)

SOSLE (at end of semester)

- Student self-assessment and faculty assessment with 12 questions with a 6-point Likert scale:
 - problem identification
 - current knowledge
 - integrated knowledge
 - information search
 - exploring identified problems
 - issue synthesis
 - final problem formulation
 - identify alternative problems
 - management strategies
 - organization presentation
 - self-assessment ability
- Student reflection with 3 open-ended questions

Implementation of Project

Completion of SDL Readiness Scale

- 29 item self-assessment with 3 subscales: self-management, desire for learning & self-control

Implementation of SDL Labs

- Weekly SDL labs were linked concurrent didactic courses - labs were facilitated by faculty and second year students

Utilization of six steps of SDL (Robinson & Persky, 2020) via "SDL Lab Prep Form"

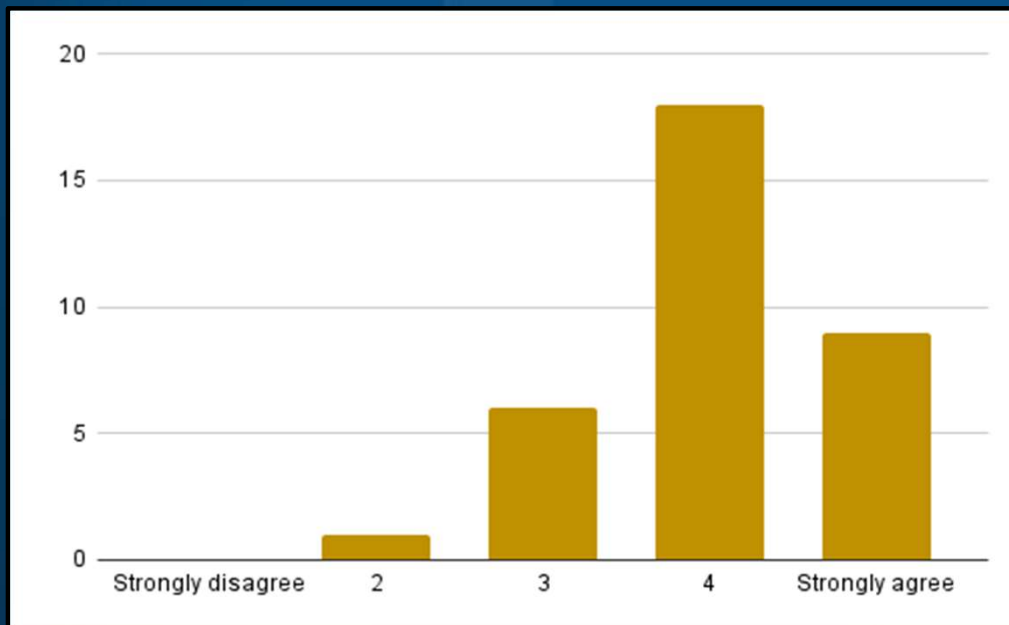
- Develop goals with measurable outcomes for each SDL session,
- Plan structure and sequence of activities to engage in with a timeline
- Identify resources needed to accomplish goals
- Work with a mentor for feedback on your plan.
- Reflect on progress toward SDL skill development

Participation in summative assessment through SOSLE at end of semester, consisting of 3-part SDL activity.

- Part 1:
 - Completed within a restricted time frame to simulate clinical practice.
 - Define problem list for the case
 - Identify SDL strengths/weaknesses
 - Get one-on-one feedback from a faculty member to guide SDL
- Part 2:
 - Acquire information about the case
 - Modify the problem list
 - Develop a plan for the case
 - Outline learning process
- Part 3:
 - Present final analysis and synthesis of the case through oral presentation
 - Complete final self-reflection of SDL skills

Self-management items SDL Readiness Scale (at start of semester)

Management Skills



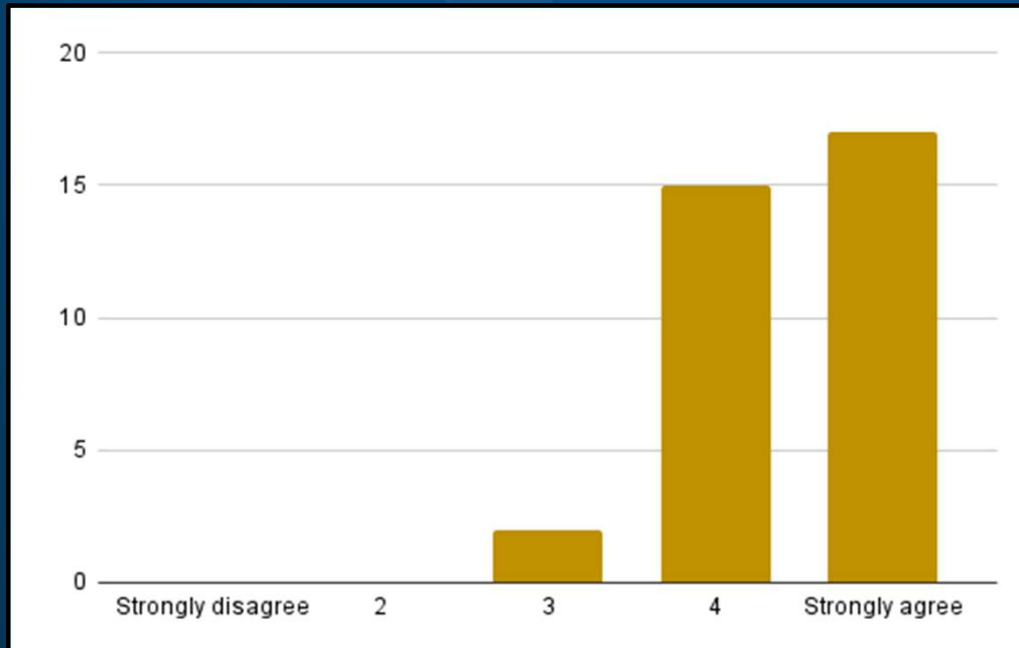
Qualitative themes from SOSLE self-assessment reflection (at end of semester)

Qualitative Theme 1 Time management

- "I do think I had sufficient information to deal with this case and it was almost too much information that I wanted to include in my slides. The time restraint is good for me to learn how to make the important aspects of the case concise."
- "The underlying reason why I wasn't able to acquire the necessary information to further deepen my response is linked to the limited timeframe and my continuous self-development on my professional goal of time-management to find new research."

Self-management items SDL Readiness Scale (at start of semester)

Prioritize My Work



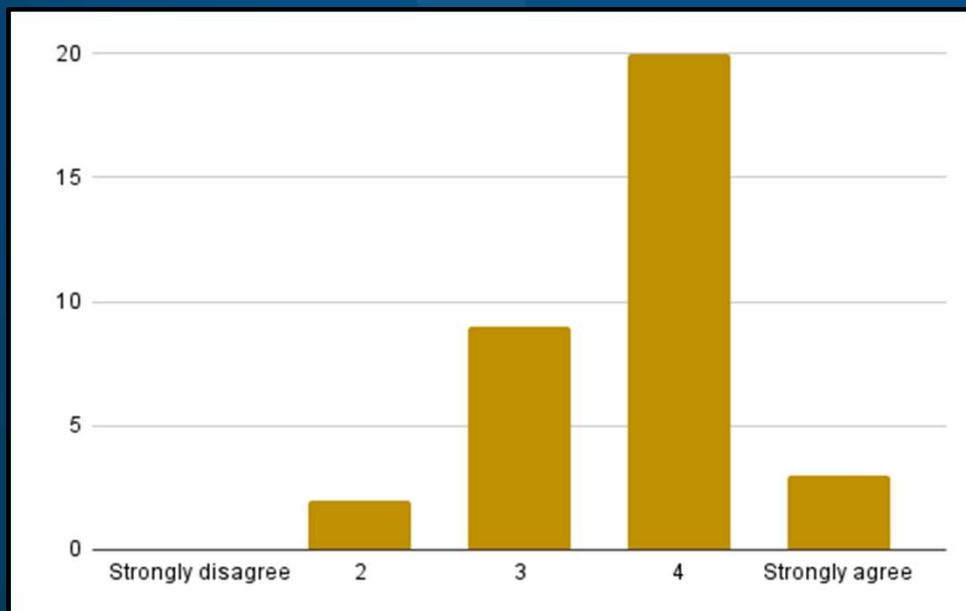
Qualitative themes from SOSLE self-assessment reflection (at end of semester)

Qualitative Theme 2 Prioritization

- "I had to reassess what I felt was most important to include. I will continue to hone my skills for identifying the most important considerations...."
- "The one issue I came across was having too much information I thought was important and deciding what to prioritize."
- "It took me a long time to condense and prioritize important information for the assignment."

Self-management items SDL Readiness Scale (at start of semester)

I am methodical



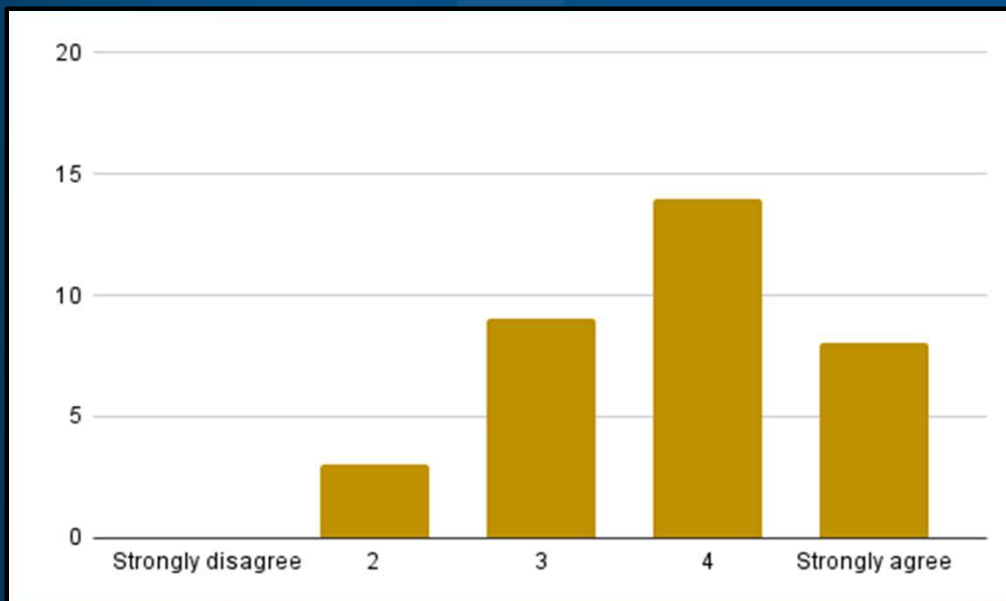
Qualitative themes from SOSLE self-assessment reflection (at end of semester)

Qualitative Theme 3 Resource utilization

- "I plan to devote time to developing skill to find reliable resources in order to further support my reasoning in my case study."
- "These resources helped me to understand the information of the case study and test my skills thus far in the program...It provided me the opportunity to apply what I have learned thus far and utilize my resources to prepare myself as a future practitioner."

Self-management items SDL Readiness Scale (at start of semester)

Confident in ability to search information



Qualitative themes from SOSLE self-assessment reflection (at end of semester)

Qualitative Theme 4 Hands-on experience

- “Until I get more experience with this diagnoses I should consult with others before implementing anything.”
- “Lack of skills related to intervention was one area I would need more experience with.”
- “Once I did the research I got a better idea of where to go but my lack of experience still showed.”

Comparison of faculty SOSLE rubric and student SOSLE self-assessment using rubric areas

Faculty and students rated consistently in:

- problem identification
- knowledge
- issue identification
- information search
- explore problems
- issue synthesis
- management strategies

Students rated themselves lower in:

- final problem formulation
- identifying alternative problems
- organizing presentation
- self-assessment ability
 - 100% of students received 6/6 from faculty; student self-assessment ranged from 3/6 to 6/6

Implications

- While students rated themselves prepared for self-management on SDL readiness, experience through a hands-on simulated case analysis resulted in students self-identifying several challenges in time management, prioritization, and resource utilization.
- Lack of hands-on experiences was identified by students as an underlying cause for their challenges.
- Self-reflection following a semester of SDL skills labs and a simulated case analysis showed students emphasized clinical skill areas more than SDL skill impact on their abilities.

Discussion

- Challenges identified in this cohort group are consistent with other research findings of time management deficiencies, insufficient research skills, and limited experience (Hill et al., 2020).
- While SDL was intentionally implemented in the program, students did not focus on how their learning needs impacted the process based on the analysis in this cohort. This could have implications for progressing in the profession:
 - Developing SDL skills is necessary for lifelong learning (Murad & Varkey, 2008).
 - Self-reflection is an essential component of professionalism and consistent self-reflection has been found to have implications for self-management on Level II fieldwork (Iliff et al., 2021).
 - Both self-assessment and lifelong learning are considered continued competencies for occupational therapy professionals (AOTA, 2021).

Conclusion

- Assessing student's SDL readiness may not be sufficient by itself; providing opportunities for students to apply SDL skills through objectively measured activities, may be beneficial.
- Despite using reflection extensively throughout this program, the faculty need to address SDL more explicitly in the curriculum and continue to facilitate student's metacognition and self-assessment ability.
- Occupational therapy educators should consider utilizing SDL skill development with objective assessment through a structured oral self-examination and student self-assessment.

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Interprofessional Ungraded Objective Structured Clinical Examinations for Exam Preparation

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COLLEGE OF ALLIED
HEALTH PROFESSIONS

Learning Objectives

- ✓ Describe the design of an ungraded objective structured clinical examination (OSCE) for interprofessional experience in preparation for competency exams.
- ✓ Discuss the benefits of involving other health profession students as standardized patients for ungraded simulation experience.



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The Current Landscape


- Healthcare is increasingly complex & stakes are high
 - Alignment with Quintuple Aim
 - Improve population health
 - Enhance care experience
 - Reduce costs
 - Clinician well-being
 - Health equity
 - Students need to be practice ready
- Demonstrate the art & science
- Importance of interprofessional team core competencies (IPEC)
- Health profession education becoming more competency based & many revised accreditation standards to meet
- Integration of classroom learning with active experiences



Comprehensive Skill-Based Experiences & Exams

- Prepare students for practice
- Provide an effective assessment of student competency



A Black female healthcare worker, possibly a nurse, is shown from the waist up. She is wearing blue scrubs and has a stethoscope around her neck. She is looking out of a large window, with her right hand pressed against her forehead in a gesture of stress or exhaustion. The background is bright and out of focus, suggesting a hospital or clinical setting.

**OSCEs are
known to
increase
student
stress and
anxiety**

Kolanczyk et al., 2019
Krusen & Martino, 2020

Share Your Thoughts

What factors contribute to objective skill-based exam stress?



Stress and Anxiety Related to Simulation Experiences



- Intimidation
- Anxiety
- Uncertainty
- Technological limitations
- Experience with patient condition
- Number of prior simulation-based learning experiences
- Application of knowledge, skills, attitudes
- Time factor

Formative > Summative = Resilience and safe place to fail

Use earlier in the curriculum and scaffold throughout the program

Educators, Take Action!

Skill-based **practice** experiences:

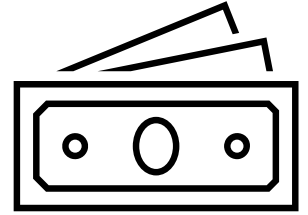
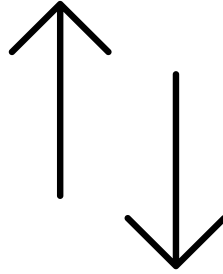
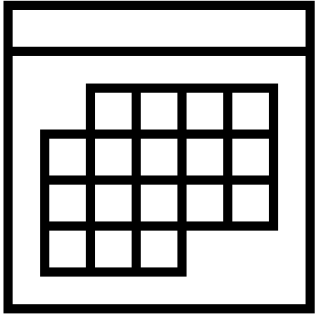
- Familiarize with the structure, environment, and expectations
- Receive educator & peer feedback
- Reduce stress and anxiety



Barriers to Practice OSCEs

- Time
- Preparation
- Faculty Support
- Patients
 - Standardized
 - Mannequins
- Space
- Cost





An interprofessional ungraded OSCE is one way to prepare students for comprehensive skill-based simulation exam and reduce stress and anxiety

Share Your Thoughts

If you had to give a thirty second pitch about why interprofessional experiences are important in education, what would be your main points?



Skill-based simulation can provide interprofessional health education students an opportunity to practice IPEC competencies.

Nieuwoudt et al., 2021

Alrasheed et al., 2021

McKinlay et al, 2021

Cortés-Rodríguez et al. 2021



Interprofessional Collaboration

Positives of involving other health profession students as standardized patients

- realistic experience
- mimics the level of stress and anxiety



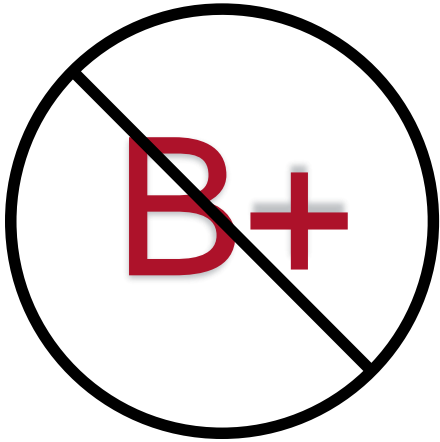
Lewis et al., 2018
Poore & Cooper, 2020
Washington et al., 2022



Main Factors to Consider

- Prepare students with competency-based education strategies.
 - Practice-ready graduates.
- A need to reduce student stress & anxiety.
- Interprofessional teamwork leads to better patient outcomes & work satisfaction.

Our Solution





Description of the Solution



OT students = therapists
Nursing students = clients

Ungraded OSCE Learning Objectives

By the end of the ungraded objective standardized clinical examination (OSCE) experience...

OT learners will:	RN learners will:
1. Communicate the distinct value of occupational therapy to the interprofessional team.	1. Understand occupational therapy's role as a member of the health care team through case study learning.
2. Apply theoretical knowledge and evidenced-based intervention strategies to select cases.	2. Identify and communicate when a referral to occupational therapy may be warranted.
3. Discuss interprofessional team dynamics.	3. Discuss interprofessional team dynamics.

Student Participants



Students (N = 42)	Doctoral level OT	Bachelor level RN (BSN)
Participant number	20	22
Course credit	Middle and older adult assessment and intervention course	Patient centered care clinical course
Progression in program	Second semester of the program	First of a three-semester accelerated program or second of a four-semester traditional program

Event Overview

- One week prior to the OSCE

Pre-brief



Three practice OSCEs



Large group debrief



Pre-brief

Introduction to OT

Learning goals

Logistics

Pre-experience ICCAS survey

Format of simulations

OT students = therapist

Nursing students = clients





Case Development



Three Practice OSCEs

- Each student performed one & observed two simulations
- Each simulation:
 - 10 min prep
 - 25 min encounter
 - 10 min debrief



Reflection

OT
observer
form was
the OSCE
rubric

Complete this question before the simulation: What is the role of occupational therapy for an individual with this condition in this setting?

0 Unsatisfactory	1 Emerging	2 Proficient	Exemplary
Performance of skill did not come up to a passing standard. Appeared disorganized. Unsafe and/or unsuitable to progress.	Patchy performance of skill. Examiner undecided whether to pass or fail. Demonstrated some aspects of skill however omissions and inaccuracies occurred in performance of the skill. Formulaic in approach. Confidence does not match skill.	Acceptable performance of skill. Despite omissions/errors demonstrated in performance of skill - safe to progress. At times, <u>can</u> be formulaic in approach.	Performance of skill above standard. Majority of technical aspects of skill demonstrated. Few minor and non-essential omissions/errors. Confident and fluent. Examiner more than satisfied candidate has passed.
		Acknowledge, Introduce, Duration, Explanation	
		Articulate rationale for intervention (FWPE 16; B.3.3.)	
		Articulate client-centered plan/goals <u>with</u> recognition of disease effects in collaboration with the client Integrates client factors (values, beliefs, & spirituality, body functions, and body structures). (FWPE 17; B.3.5.)	
		Select client-centered, OB intervention plan that motivates & challenges the client (FWPE 19; B.4.3.)	
		Implement client-centered, OB intervention plan, integrating occupation throughout, address performance patterns & skills (FWPE 20; B.4.2.; B.4.3.; B.4.10.)	

Reflection

- Pre & post sim question about OT's role
- Primary BSN diagnosis & priority items
- Small group debrief
 - Therapist self-reflection
 - Client reflections
 - OT & RN feedback
 - Instructor feedback

Question	What went well?
Complete this question prior to the simulation:	
What is the role of occupational therapy for an individual with this condition in this setting?	What would you like the student occupational therapist to have done differently?
Complete the following questions during the simulation:	
Did you observe therapeutic use of self/ building rapport? Explain. <ul style="list-style-type: none"> • Using AIDET, advocating, encouraging, collaborating, empathizing, instructing, problem-solving 	What did you learn from observing this scenario?
Was the intervention session client-centered and recognized the effects of the disease? Explain. <ul style="list-style-type: none"> • Integrates client factors well [values, beliefs, & spirituality, body functions (physiological, cognitive, neurobehavioral, and psychological and emotional), and body structures]. • Collaborates with client throughout intervention. • Strongly correlates with the client's goals. 	What questions do you have for the occupational therapist student, lab instructor, or your group?
Was the intervention session contextually and culturally relevant? Explain. <ul style="list-style-type: none"> • Considers contextual factors (setting, built environment, social supports, attitudes, and services, systems, and policies). 	What nursing problems would be identified for this patient?
Was the client engaged in occupation-based interventions? Explain.	What priority nursing assessments would be needed for this patient?
	Complete this question after the simulation:
	What is the role of occupational therapy for an individual with this condition in this setting?



Large Group Debrief

- Lessons learned & IP team dynamics
- Referrals & consults to IP team members
- Explained OT & how OT & BSN can work together
- Post-experience ICCAS survey

OT Student Documentation





Assessment Tools & Measures

Interprofessional Collaborative Competency Attainment Scale (ICCAS)



- All students completed during pre-brief & debrief
- 20-item self-report tool measuring:
 - Communication
 - Collaboration
 - Roles & responsibilities
 - Collaborative patient-family centered approach
 - Conflict management/resolution
 - Team functioning

Link to [ICCAS](#)



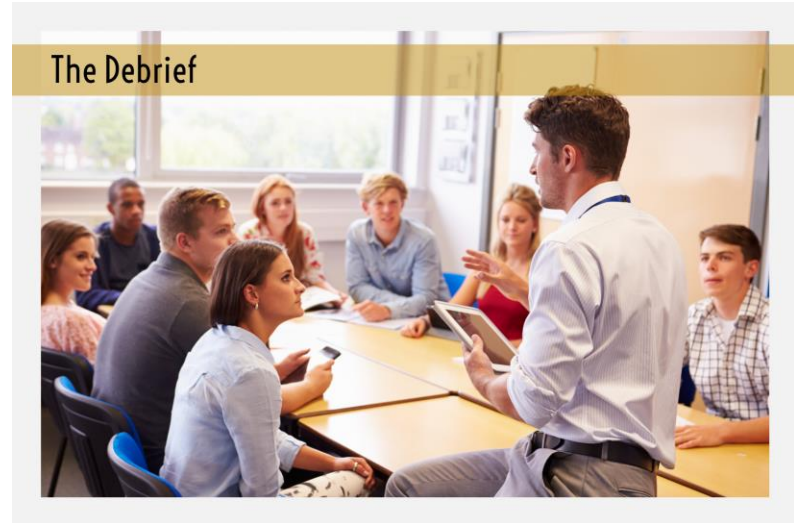
Post-Event Student Survey

Being a patient in the OT/RN interprofessional activity contributed to increasing my knowledge and attitudes related to....

- Need for effective communication in developing a care plan
- Including the patient in the decision-making process
- Understanding the abilities and contributions of an occupational therapist on the healthcare team.
- Recognizing how other healthcare professional's skills and knowledge complement my own.
- Developing a holistic plan for patients.
- Understanding the abilities and contributions of a nurse on the healthcare team.

Student Debrief

- Recorder captured students' comments during the simulation event debrief





Post-Event Facilitator Survey

- What went well?
- What improvements are needed?
- Ideas for future collaborative events between the two academic programs?



Post-OSCE Survey

- OT students completed an 8-question survey one month after the actual OSCE (approx. 5 weeks post-event)

Questions:

- The simulation event prepared me for the actual simulation.
- There is benefit to having patients in the simulation event portrayed by other health care professional students rather than an OT classmate (e.g., mimicking the stress & anxiety of the actual simulation)
- Working with other healthcare professional students as patients in the simulation event improved my preparation for the actual simulation.
- The simulation event format consisting of three simulations (10-min prep, 20-25 min SIM, 10-min debrief) along with a large group debrief was beneficial for learning.
- The simulation event decreased my anxiety for the actual simulation.
- The simulation event decreased my stress for the actual simulation.
- I value the use of role-play in helping me prepare for fieldwork and practice.



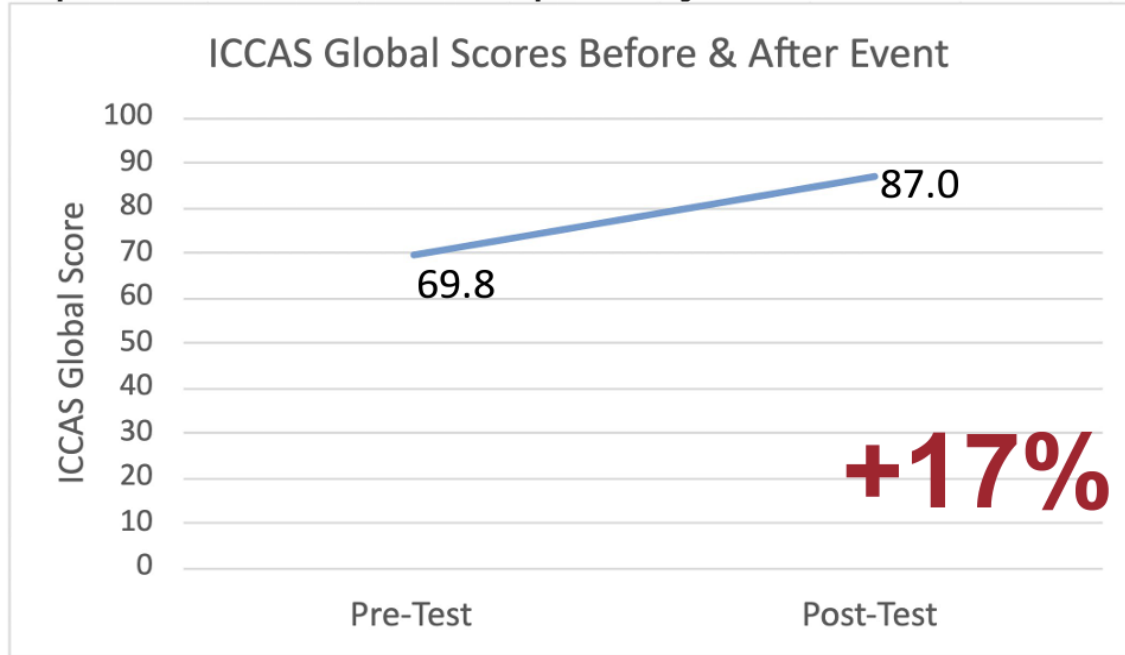


Results

ICCAS Results



OTD & BSN students had a significant improvement in interprofessional core competency skills $t(37)=9.91, p<.001$



- 35/38 (92% of the sample) increased on ICCAS Global Scores
- 92% Strongly agreed to the need for effective communication in developing a care plan
- The ICCAS item with greatest improvement was providing constructive feedback to IPE team members

Post-Event Student Survey Results



Being a patient in the OT/RN interprofessional activity contributed to increasing my knowledge and attitudes related to....	Strongly Agree n(%)	Somewhat Agree n(%)	Somewhat Disagree n(%)	Strongly Disagree n(%)
1. Need for effective communication in developing a care plan.	35 (92.1)	3 (7.9)	0 (0.0)	0 (0.0)
2. Including the patient in the decision-making process.	34 (89.5)	4 (10.5)	0 (0.0)	0 (0.0)
3. Understanding the abilities and contributions of an occupational therapist on the healthcare team.	32 (84.2)	5 (13.2)	0 (0.0)	1 (2.6)
4. Recognizing how other healthcare professional's skills and knowledge complement my own.	30 (78.9)	8 (21.1)	0 (0.0)	0 (0.0)
5. Developing a holistic plan for patients.	29 (76.3)	9 (23.7)	0 (0.0)	0 (0.0)
6. Understanding the abilities and contributions of a nurse on the healthcare team.	26 (68.4)	10 (26.3)	1 (2.6)	1 (2.6)

Student Debrief & Facilitator Survey Results



Four
themes
were
identified:

decreasing stress and anxiety,

understanding the breadth of OT,

recognizing own competencies, and

benefiting from collaboration.



Understanding the Breadth of OT

- **"I had no idea OTs did so much with so many different people."**
- Another student was surprised at the "many environmental changes for people with different conditions."
- A nursing instructor commented that asking students to explain the role of OT to a near-peer at the end of the simulation event was a great way to show their understanding of this interprofessional team member.



Recognizing Own Competencies

- **"It was great to see how we can work together to accomplish the same patient goals but how we take a different perspective and approach for the same problem."** – RN student
- "This experience has helped me realize how as OTs we really do have expertise in activity analysis and grading the activity to meet people's needs." – OT student
- "Learning about nursing [...] and how it aligned with OT helped us during the simulation, but also in the future for interprofessional teams!" - OT student



Benefiting from Collaborating

- "Students were very engaged, nursing students role played very very well; students participated in feedback, and it was valuable." – OT instructor
- **The nurses did a wonderful job portraying the patients which made it a truly valuable and useful experience. That helped me see that really getting into character is what is going to help my classmates and I learn the most from each interaction."** – OT student
- "The in the moment learning and reflections of the students were great for building rapport and understanding of the interdisciplinary team." - OT instructor



Post-OSCE Survey Results

91% of OTD students agreed or strongly agreed the mock simulation:



Preparation



Anxiety
Stress

Post-OSCE Survey Results



One-month post-OSCE survey item	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
	n(%)	n(%)	n(%)	n(%)	n(%)
The simulation event prepared me for the actual simulation.	8(72.7)	2(18.2)	1(9.1)	0(0.0)	0(0.0)
There is benefit to having patients in the simulation event portrayed by other health care professional students rather than an OT classmate (e.g., mimicking the stress and anxiety of the actual simulation).	7(63.6)	3(27.3)	0(0.0)	1(9.1)	0(0.0)
Working with other health care professional students as patients in the simulation event improved my preparation for the actual simulation.	6(54.5)	3(27.3)	1(9.1)	1(9.1)	0(0.0)
The simulation event format consisting of three simulations (10-min prep, 20-25-min SIM, 10-min debrief) along with a large group debrief was beneficial for learning.	6(54.5)	5(45.5)	0(0.0)	0(0.0)	0(0.0)
The simulation event decreased my anxiety for the actual simulation.	5(45.5)	5(45.5)	0(0.0)	1(9.1)	0(0.0)
The simulation event decreased my stress for the actual simulation.	5(45.5)	5(45.5)	0(0.0)	1(9.1)	0(0.0)
I value the use of role-play in helping me prepare for fieldwork and practice.	4(36.4)	6(54.5)	1(9.1)	0(0.0)	0(0.0)

Decreasing Stress and Anxiety



"The mock OSCE was incredibly helpful for me, not only did it help prepare me for the exam, but it gave me twice the practice."



"The mock was a great exercise to increase my confidence for the actual OSCE and an additional opportunity to work on all of the skills required to be an OT."



Discussion

Findings Suggest Ungraded OSCEs

- Improves teamwork
- Improves understanding the roles of interprofessional team members
- Make meaningful and positive differences in preparing students for professional practice
- Improve student wellness
- Decrease academic pressure



Boulet (2008)
Holmboe et. al., (2011)

Benefit of Involving Interprofessional Students



- More authentic experience with incorporating the nursing students
 - Intentionally or unintentionally lead the student therapist in the right directions
 - Interprofessional students bring their knowledge and experience of the condition to the role-play



Learning Strategies



- Active learning method
 - encouraged peer-learning,
 - receiving multiple viewpoints on the case, and
 - reflectively forming their own approach to the same case





A Single Event Can Improve IPE Skills

- Encouraged thoughts about interprofessional collaboration for a variety of patients across different setting.
- Worthy learning experience
- In-person event with both hands-on and observation portions



Nieuwoudt et al., 2021
Alrasheed et al., 2021
Cortés-Rodríguez et al., 2021
Reime et al., 2017
Washington et al., 2022

Limitations



No
comparison
group

Post-test
survey term
“patient”

Implications for Education

- Worthwhile IP event in the curriculum
- Involve another health profession student as a patient
- Opportunity to manage stress and anxiety



An Ungraded OSCE Provides One Feasible Method

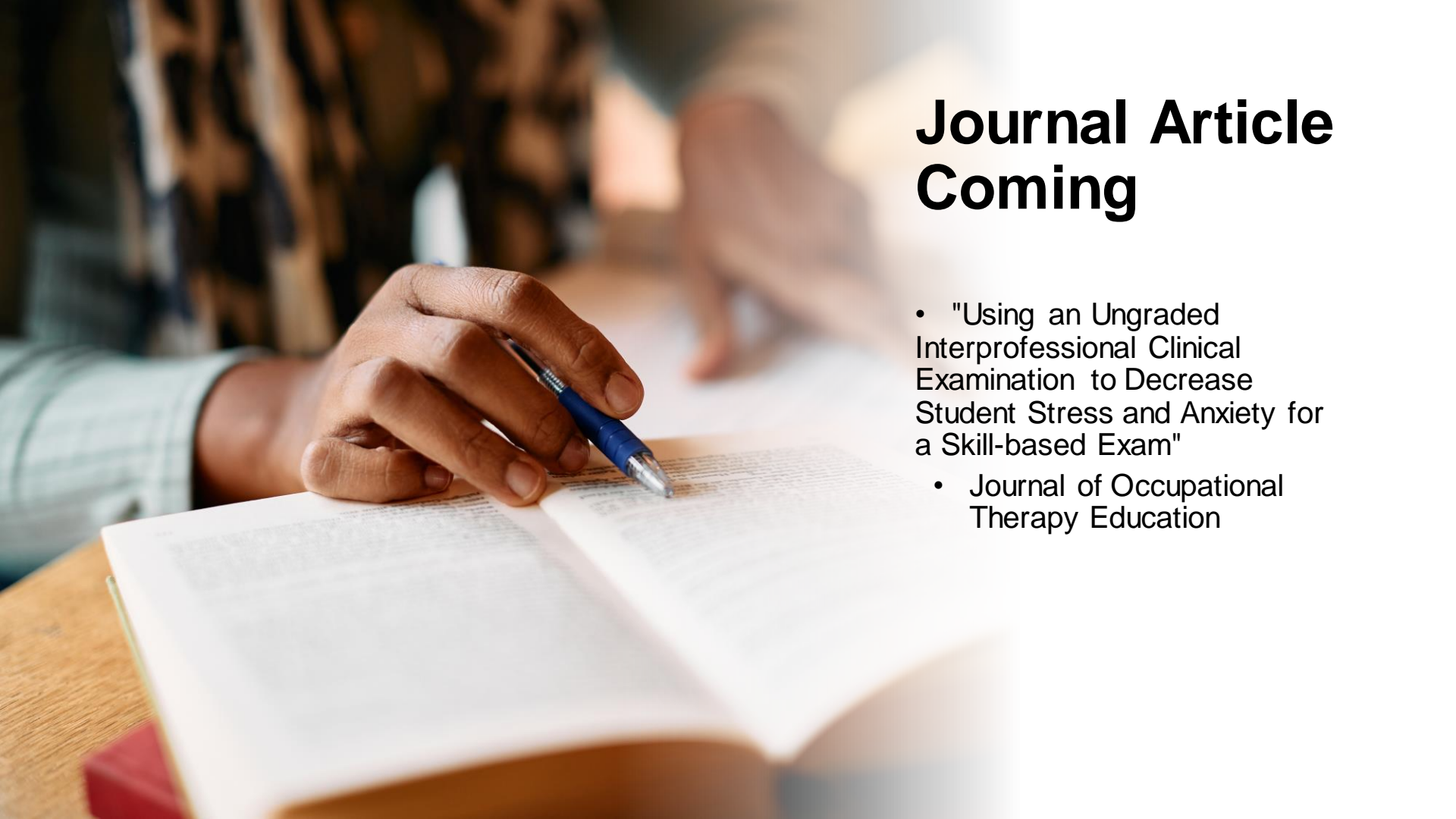


- 1) intentionally improve student well-being by decreasing stress and anxiety for simulation exams
- 2) provide opportunities for simulated clinical experiences
- 3) develop a collaborative workforce



Design Logistics and References



A close-up photograph of a person's hand holding a blue pen, poised to write on an open book. The background is blurred, showing another person's hand and a patterned garment. The lighting is soft and natural, highlighting the texture of the paper and the grip of the pen.

Journal Article Coming

- "Using an Ungraded Interprofessional Clinical Examination to Decrease Student Stress and Anxiety for a Skill-based Exam"
- Journal of Occupational Therapy Education




Second Year Changes

- Additional questions on pre and post-tests
- Pre-work of videos about OT and nursing or built into the event (campus dependent)
- Gave scenarios to nursing students beforehand (not role-playing styles)
- Modified time frame to 20-minute simulations
- During the large group debrief, incorporated more RN side so not so heavily focused on OT



Future Directions

- Further integrate into curricula
- Advocate for additional events
- Examine the effectiveness of promoting professions
- Examine different models for distance students (telehealth, etc.)



Take Away and Contact Information

Interprofessional ungraded OSCEs can help prepare students for simulation-based examinations, build a cohesive workforce, and ultimately improve patient care.

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COLLEGE OF ALLIED
HEALTH PROFESSIONS



UNIVERSITY OF
Nebraska
Medical Center



Creating a Ready Mind, Body, and Spirit to Optimize Learning

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Rockhurst University

Background

Mental health is a vital part of overall holistic health, composed of emotional, psychological, and social well-being, as it directly influences how one handles stress, relates to others, and makes healthy choices

For university students, poor mental health is connected to lower program retention, grade point averages, academic performance, and graduation rates

The prevalence of poor mental health in college students is well-documented, even among PT and OT graduate students

(CDC, 2022; Byrd & McKinney, 2012; Ellison et al., 2020; Webber et al., 2020)

Purpose and Research Question

Purpose:

- 1) Assess graduate OTD and DPT student mental health and wellness
- 2) Determine if interventions focused on connecting with students and educating them on health and wellness management impact students' well-being and mental health

Research Questions:

1. What is the status of students' well-being and mental health?
2. What is the impact of interventions focused on connecting with students and educating them on health and wellness management on students' well-being and mental health?

Method



Participant Recruitment

- Informed consent



Participants

- DPT students
- OTD students



Setting

- Flexible classroom

Method

- Beginning & End of Semester Surveys

Physical
Activity

Sleep

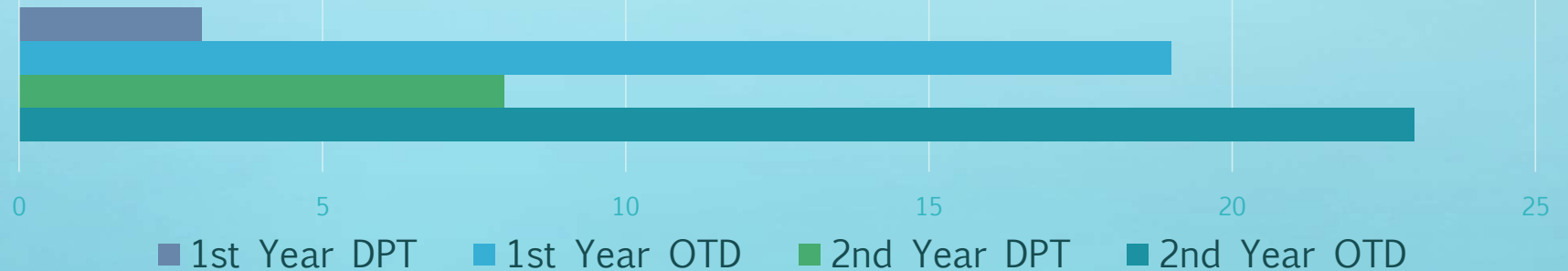
Nutrition

Perceived
Stress

Perceived
Social
Support

Pre-Survey: Participants

53 respondents; Avg 23 y/o (51 F, 1 M, 1 prefer not to say)



Pre-Survey: Beginning of Spring Semester

Physical Activity

Avg days engage moderate-vigorous exercise? **3.92**

Avg min engage activity at this level? **43.42**

Days perform muscle strength exercises? **2.33**

39.62% not get 150 min aerobic exercise/week

Sleep

Difficulty falling asleep, staying asleep, or feeling poorly rested in the morning? **39.62% usually or always**

Did work or other activities prevent you from getting enough sleep? **43.40% usually or always**

Nutrition

How many servings of fruit did you eat each day? **58.49% 2 or less**

How many servings of vegetables did you eat each day? **47.12% 2 or less**

Pre-Survey: Beginning of Spring Semester

Perceived Stress

In last month, been upset because of something that happened unexpectedly? **32.08% fairly or very often**

In last month, felt that you were unable to control important things in your life? **37.74% fairly or very often**

In the last month, felt nervous and stressed? **77.36% fairly or very often**

# Respondents	PSS
13	Low Stress (0-13)
30	Mod Stress (14-26)
10	High Stress (27-40)

Social Support

Vast majority feel social support

Intervention Sessions

Come and Join the RU Well- Mind Body Spirit Group:

RELAXING ART WITH JOAN DELAHUNT

Open to OTD and DPT students

Hope to see you there!

February 21 at 3:00pm
Arrupe 114

OPEN TO OTD AND DPT STUDENTS

NUTRITION FOR YOU!

Come enjoy a study break and a nutrition conversation with expert Shelly Summar, MSEd, RD, LD, FAND. You'll have a chance to ask nutrition questions you've always wanted to know the answer to and try some easy-to-prepare, nutritious and delicious snacks. Feel free to submit questions ahead of time to make sure you get your questions answered at ssummar@cmb.edu.

**FEBRUARY 28TH
3:00 PM
ARRUPE 114
HOPE TO SEE YOU THERE!**

COME AND JOIN THE RU WELL- MIND BODY SPIRIT GROUP:

BREATH CONTROL & VAGAL WORKSHOP FOR STRESS MANAGEMENT WITH DR. RACHELE BURRIESCI

OT AND PT SCHOOL GOT YOU **STRESSED?** FEELING MAJOR **PANIC** BEFORE PRACTICALS? FEEL LIKE YOUR NERVOUS SYSTEM IS ALWAYS **ON FIRE?**

LET'S LEARN HOW TO DOWNREGULATE TOGETHER, TAPPING INTO OUR NERVOUS SYSTEM VIA BREATH CONTROL AND VAGA TECHNIQUES CAN BECOME AN INTEGRAL PART OF OUR DAILY HYGIENE & DURING THOSE HUGE FREAKOUT MOMENTS.

1. LEARN HOW TO ACTIVATE THE DIAPHRAGM
2. PERFORM 360 AND ORGAN BREATHING
3. STIMULATE THE VAGUS NERVE
4. PERFORM 6-HEALING SOUNDS

Open to OTD and DPT students
March 7 at 3:00 pm
Arrupe 114

Come and Join the RU Well- Mind Body Spirit Group:

CINDY KRAUS, MT-BC
(BOARD CERTIFIED MUSIC THERAPIST)

THE GROUP SESSION WILL INCLUDE EDUCATION ON MUSIC FOR STRESS RELIEF, LEAD A PLAYLIST CREATION ACTIVITY, AND END WITH A LITTLE RELAXATION TO MUSIC!

**MARCH 21ST AT 3:00 PM
ARRUPE 114**

Open to OTD and DPT students
Hope to see you there!

OPEN TO OTD AND DPT STUDENTS

COME AND JOIN THE RU WELL- MIND BODY SPIRIT GROUP:

MIXXEDFIT® WITH SAMANTHA-MAE MEYER
MOTR/L (RU MOT ALUMNI 2022)

MIXXEDFIT IS A PEOPLE-INSPIRED FITNESS PROGRAM THAT COMBINES EXPLOSIVE DANCE MOVEMENTS WITH BODYWEIGHT TONING.

**MARCH 28 AT 3:00 PM
ARRUPE 114**

MAKE SURE TO BRING TENNIS SHOES, COMFY CLOTHES, WATER, AND MAYBE A TOWEL TO WIPE YOUR SWEAT OFF!

WANT TO LEARN HOW TO RESPOND BETTER TO STRESSFUL SITUATIONS?

COME JOIN US TO LEARN ABOUT EMOTIONAL REGULATION, MINDFULNESS AND COMPASSION FROM OUR GUEST EXPERT

Jennifer Worth, LCSW

Open to OTD and PTD Students
April 4 at 3:00 pm
Arrupe 114

Come and Join the RU Well- Mind Body Spirit Group:

✧ **Soften into Sleep** ✧
with Tasha Miller,
Certified Yoga Instructor

Join us to explore different ways to wind down from the day and settle into sleep. Our bodies hold so much throughout the day and we will talk about and experience different ways to allow our bodies to recover and rest.

**April 11 at 3:00pm
Arrupe 114
Open to OTD and DPT students**

RU Well- Mind Body Spirit Group presents:

Puppy Therapy

Come learn about the therapeutic benefits of pet therapy from friends at Mo-Kan Pet Partners!
<https://mo-kanpetpartners.org/>

**April 18 at 3:00 PM
Arrupe 114**

Open to OTD and DPT students
Hope to see you there!

Relaxing Art

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
9	4	4



“Incorporate more intentional relaxation time into my day”

“Use art to destress”

“Take more time to doodle or color to space out studying”



“Do more abstract art with friends”

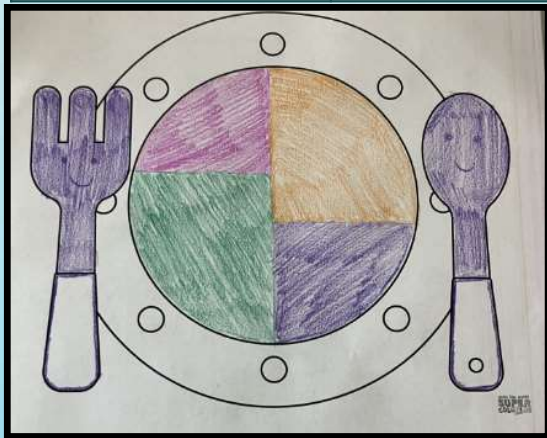
“Share relaxing art with others”

“Take more time to slow down and relax even if just for 30 min”

“Pursue art as a relaxation strategy”

Nutrition

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
19	4	3.875



“Include at least 3 food groups in every meal”

“Ways to incorporate healthier protein and carbs in daily meals”

“Make sure I hit 5 servings fruit and veg”

“Find healthy snacks that I love”



“Be more conscientious about getting all 5 food groups in”

Breathing and Vagal Workshop

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
11	3.91	4

“I plan to use these strategies while studying or before tests”



“Share new breathing techniques with my classmates”

“Focus more on breathing through my diaphragm throughout the day”



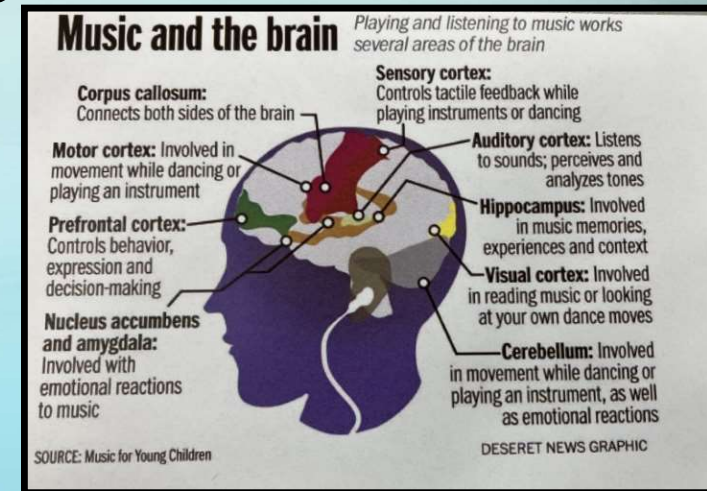
“Practice deep breathing when stressed”

Music Therapy

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
8	4	3.875

“Pay attention to what the music is doing to me mentally and physically”

“Focus on my music and what part of the brain it is stimulating”



“Use relaxation/music when stressed”

“Progressive muscle relaxation when stressed or anxious”



Physical Activity

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
7	4	4



"Exercise can be fun!"

"I hope to join the gym!"

*"Dance a little more when
listening to music"*

"Dance as a form of exercise"

Empathy and Compassion

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
5	3.8	4

“The tapping on opposite arms to relax and regulate”

“Review my boundaries and follow through”

“Boundaries! It is totally okay and healthy to have boundaries with others”



“I will use some of the techniques talked about today for myself and my patients”

Yoga for Sleep

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
5	4	4

“Take time to relax before bed and let go”

“Very calming”

“Some restorative poses before bed, start a routine”

“I like how each week it is something new/different, so fun!”

“Stretch before bed, it was very relaxing”



“Use this before bed or when studying to calm down”

Puppies!

# Attendees	Avg Rating of Presentation (0-4)	Avg Rating of Usefulness (0-4)
~20	4	4



“Try to learn about the process at having a therapy dog”

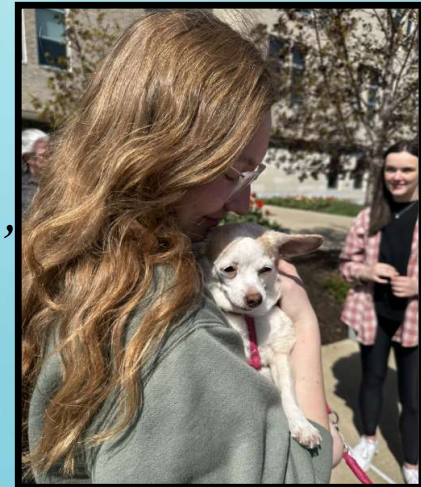
“Take time to pet a pet”



“Cuddle my puppy and look into dog therapy”

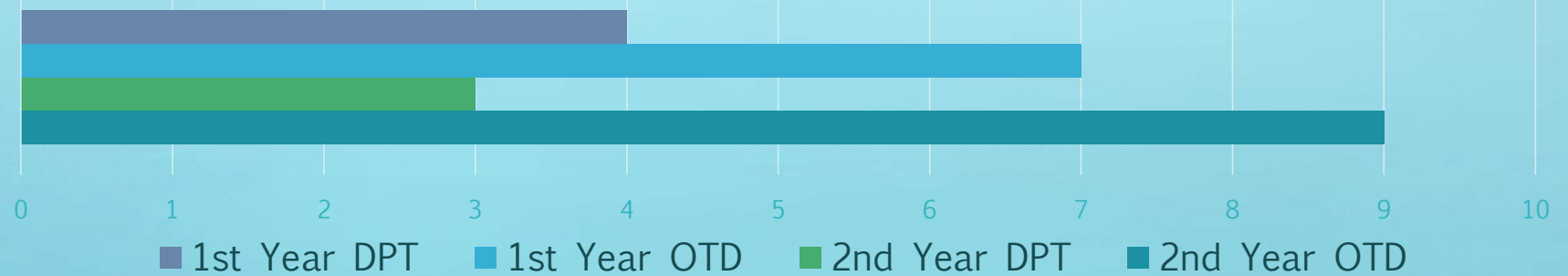
“Go tell my friends about KC Pet Project”

“Consider utilizing therapy dogs/advocating for them”



Pre-Survey: Participants

23 respondents; Avg 26.7 y/o (21 F, 2 M)



Post-Survey: End of Spring Semester

Physical Activity

Avg days engage moderate-vigorous exercise? **3.02**

Avg min engage activity at this level? **57.07**

Days perform muscle strength exercises? **1.87**

52.17% not get 150 min aerobic exercise/week
(Increased 12.55%)

Sleep

Difficulty falling asleep, staying asleep, or feeling poorly rested in the morning? **39.13% usually or always**

Did work or other activities prevent you from getting enough sleep? **52.17% usually or always**
(Increased 8.77%)

Nutrition

How many servings of fruit did you eat each day? **56.52% 2 or less**

How many servings of vegetables did you eat each day? **43.48% 2 or less**

Post-Survey: End of Spring Semester

Perceived Stress

In last month, been upset because of something that happened unexpectedly? **21.74% fairly or very often**
(Decreased 10.34%)

In last month, felt that you were unable to control important things in your life? **21.74% fairly or very often**
(Decreased 16%)

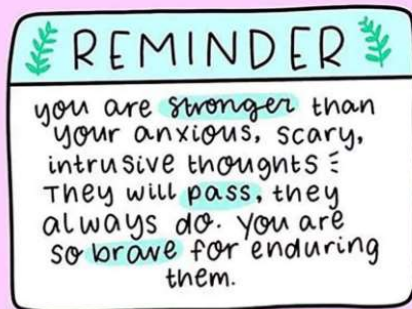
In the last month, felt nervous and stressed? **69.57% fairly or very often**

# Respondents	PSS
3	Low Stress (0-13)
19	Mod Stress (14-26)
1	High Stress (27-40)

Social Support

Vast majority feel social support

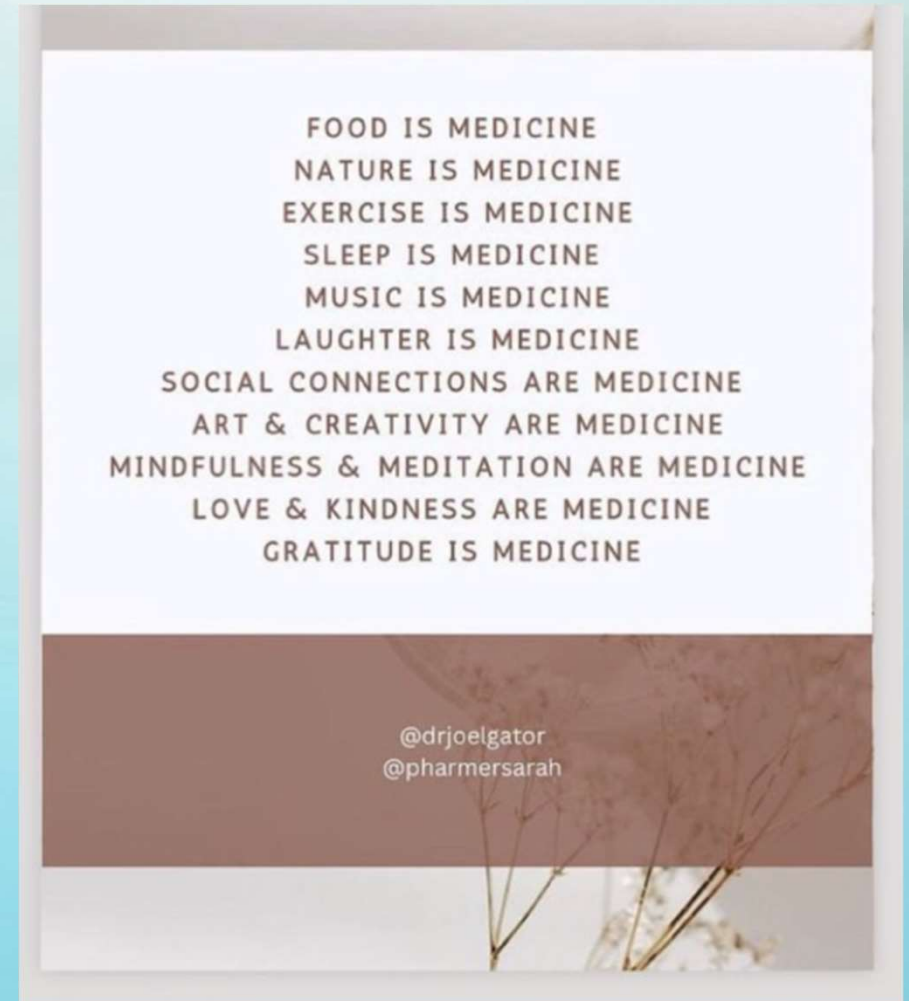
Summary



- Many graduate students do not have optimal physical activity, nutrition, sleep, and/or stress management strategies but they do feel they have strong support systems
- Evidence supports that wellness improves academic performance and decreases stress
- Students may not feel they have time, need develop skills in wellness during graduate programs
 - Key in interventions are that they are short, focused
- Students that learn strategies to improve wellness believe they are useful and plan to incorporate them into their routines
 - These students qualitatively report the techniques decrease their stress

Future Directions

- Offer opportunities to engage in promoting mental wellness with a “Self-Care Cart”
- Incorporate mental wellness activities into courses
- Provide a “Mental Wellness Mini-Conference” featuring our guest experts who joined us for our 8-week intervention sessions
- Examine academic performance





References

Questions?



Contact Us!

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