

Collaborative Practice initiatives between nurses and occupational therapists in hospital-based care for the elderly enhance positive individual perceptions of their clinical roles and responsibilities

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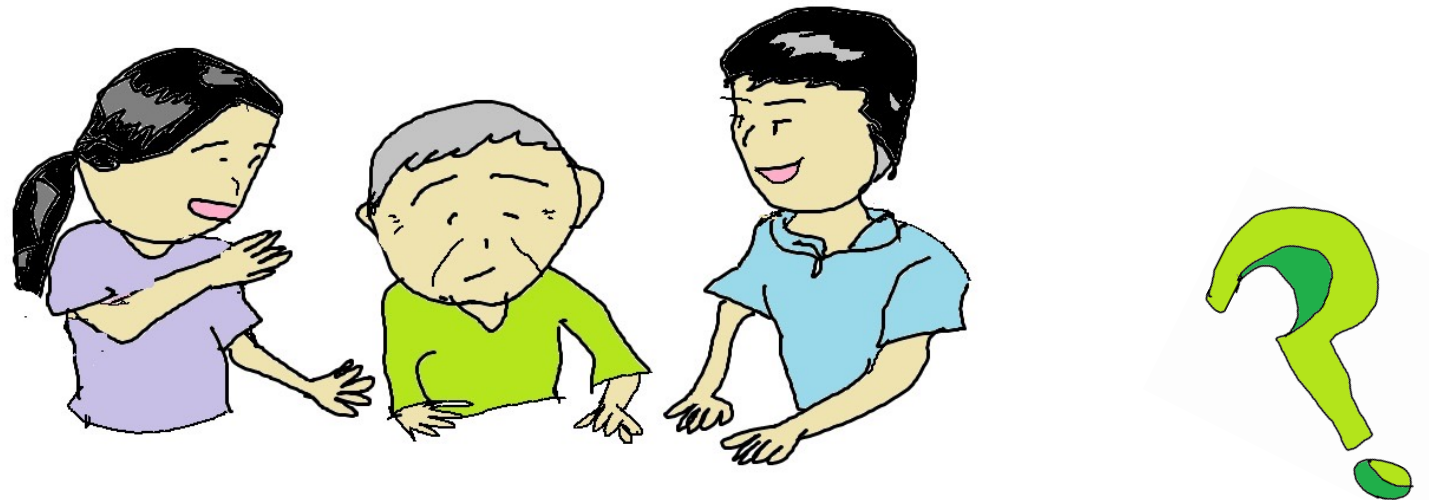
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Introduction

- Nurses and OTs play vital roles in improving ADLs and promoting individual's independence
- Collaborative Practice (CP) between these two professions is crucial



- However, concrete benefits and barriers of the CP, as perceived by healthcare staff, have not been adequately explored

This study aims to identify the benefits and barriers of CP between nurses and OTs

Methods^①

The CP was designed to create co-planning between the two professionals for facilitating elderly patients' ADLs (kondo et al.,2025)

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Research Article

Interprofessional Collaboration Between Nurses and Occupational Therapists Enhances Independence and Reduces Disposable Absorbent Product Use in Older Patients

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Introduction: The prospective, historically controlled study evaluated whether a collaborative practice (CP) model between nurses and occupational therapists improves activities of daily living (ADLs) and reduces the use of disposable absorbent products and physical restraints in hospitalized older patients.

Methods: Data from the historical control group ($n = 72$), who received usual care, were collected from medical records, and the intervention group ($n = 46$), who participated in the CP based intervention, was recruited in a community based care ward in a regional hospital. The CP model was designed to facilitate collaborative planning for improving ADLs between nurses and occupational therapists. Outcome measures included disposable absorbent product use, physical restraint use, and the functional independence measure (FIM). Assessments were conducted at admission and discharge. Propensity score matching was applied to balance baseline characteristics between groups and to reduce potential confounding factors.

Results: Propensity score matching generated 45 pairs ("historical controls," $n = 45$, and "interventions," $n = 45$). Although physical restraint use was reduced in both groups ($p < 0.007$), the use of disposable absorbent products in the intervention group was significantly reduced compared to the historical control group ($p = 0.020$). Additionally, significant interaction effects were observed between time and group for all FIM scores, indicating greater improvements in ADLs in the intervention group, with moderate to large effect sizes ($p < 0.013$, partial $\eta^2 > 0.068$).

Conclusions: This study demonstrated the positive impact of a CP model between nurses and occupational therapists in improving ADLs and reducing disposable absorbent product use in older patients. These findings suggest that this model of CP enhances the quality of geriatric care.

Trial Registration: UMIN Clinical Trials Registry number: UMIN000047072.

Keywords: activities of daily living; collaborative practice; disposable absorbent products; nurse; occupational therapist

1. Introduction

Older people are vulnerable to activity restrictions in hospital settings, which causes negative effects [1, 2]. For example,

a reduction in activity during hospital stays often leads to passivity and immobility [3, 4]. As a result, older patients often experience a loss of activities of daily living (ADLs) compared to their pre-admission levels [5].

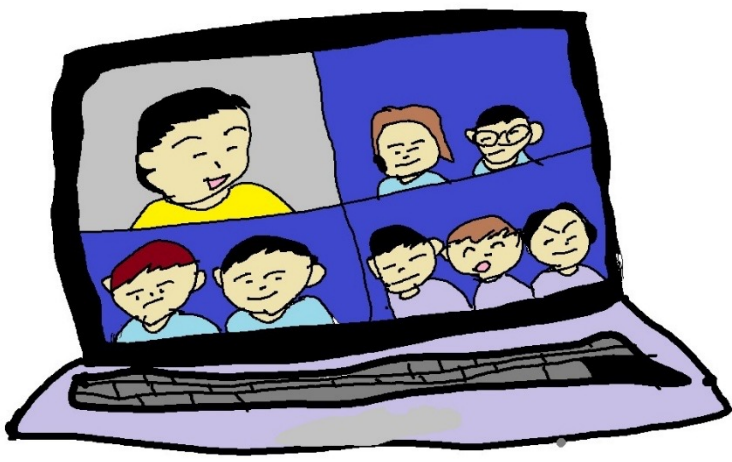


1st meeting

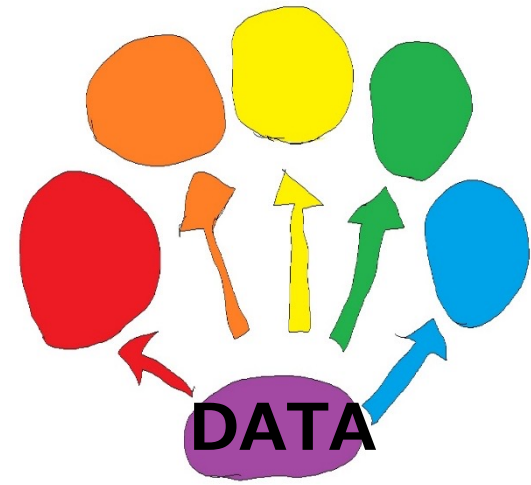
2nd on-site practice



Methods②



Focus group interview
(4 nurses and 3 OTs)



Thematic analysis

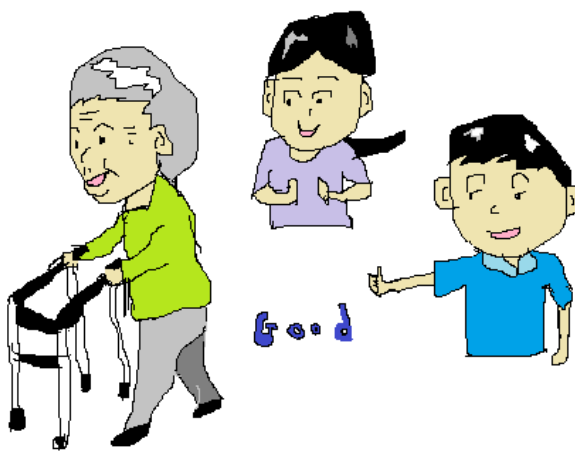
This research was approved by the ethical committees of the university and hospital

Results

Five themes were identified



1. Improvements in the quality of hospital care services



2. Enhancement of the CP skills



3. Positive changes in individual perceptions of their clinical roles and responsibilities



4. Factors facilitating the CP

5. Potential barriers to the CP

Conclusion

- Nurses and OTs perceived that the CP initiative fostered their collaboration competencies and improved the quality of hospital care services
- Interestingly, sharing positive individual perceptions of clinical roles and responsibilities was found to be fundamental to the successful implementation of CP
- These findings provide valuable insights for the effective implementation of CP in hospital-based elderly care

Collaboration

