

SUPPORTING THE RURAL OCCUPATIONAL THERAPIST



Amy Knott, MOT, OTR/L

BACKGROUND

- Mills and Millsteed (2002) identified that working in a rural setting provides opportunity and variety. Though this can be interesting for many therapists, this setting also provides challenges. Often rural occupational therapists are challenged with the limited or lack of resources and support. Unfortunately, these can result in burnout as well as difficulty with staff retention.
- Burnout is defined by the World Health Organization (2019) as the result of “chronic workplace stress that has not been successfully managed”.
- The purpose of this capstone project was to positively impact rural occupational therapists by implementing a mentorship support network in rural Minnesota.
- It is important to provide opportunities for rural therapists to build networks and increase access to resources. To allow rural therapists the opportunity to participate in supportive sessions, it is important that there is a virtual platform used. Participants will be able to attend from their place of employment, a rural healthcare facility to decrease the need for travel time.
- The rural therapist often faces unique challenges due to isolation and limitation of resources. To address these challenges, the Person-Environment-Occupation (PEO) Model was utilized to create a virtual support network to meet the needs of the rural occupational therapists.

EVIDENCE-BASED QUESTION

Does the implementation of a virtual support group aid to decrease factors contributing to burnout experienced by rural occupational therapists?



SIGNIFICANCE

- There is a need to improve support for rural occupational therapists. Rural occupational therapists have reported the limitation of support and lack of resources impacting their experienced burnout (Lee & Mackenzie, 2003).
- Development and implementation of a support network and mentorship for rural occupational therapists can help to provide resources and improve confidence and social interaction among the rural occupational therapists within the same healthcare system.
- The implementation of this support network for the rural occupational therapist can improve confidence, job satisfaction, and decrease risk of burnout.
- Occupational therapist have substantial knowledge and education on enhancing and promoting engagement in occupation.
- There is a need to promote and support occupational therapy profession, especially in the rural setting.

LITERATURE REVIEW

- Burnout can be experienced among all healthcare professionals. In the rural setting, occupational therapists have reported the limitation of support and lack of resources impacting their experienced burnout (Lee & Mackenzie, 2003). Though the variety in the rural setting can be intriguing it can also bring challenges. Rural therapists often feel that they are not able to specialize in any one specialty area to meet the needs of their patient population, but instead become the ‘jack of all traits’ (Peterson et al., 2003).
- Literature also identifies the need to support therapists in rural settings. Social networking opportunities are beneficial for rural therapists to develop a community as well as providing access to additional resources. Doyle et al., 2019 reported that supportive communication should focus on knowledge, translation, professional behaviors, productivity goals and professional networks.
- Burnout not only affects the therapist’s quality of life, but it also impacts the quality and effectiveness of provided treatment sessions (Park, 2021).

METHODS

Setting: Rural occupational therapists participating from their rural healthcare facility of which they are employed.

- Population:**
- Convenience sample of 4 licensed rural occupational therapists
 - Employed at a rural healthcare facility within the same healthcare system in Minnesota
 - Recruitment was based on their availability and interest to participate.
 - Experience three to greater than sixteen years

Design: Mixed Method

Implementation: Participants were invited to attend the 30-minute virtual sessions through Microsoft Teams Application. Session topics were identified by participants through a focus group to ensure that sessions are meaningful and valuable to the participants. Session notes were recorded as well as electronic folders available for shared resources. All participants can access and add/modify the content. Sessions are used to improve networking, relationships and share resources amongst participants.

- Data Collection:**
- A focus group was facilitated using semi structured questions to identify the goals and objectives of the group as well as guide topics during the session.
 - Pre and post surveys included both qualitative and quantitative measures to improve validity and provide accurate measures.
 - Notes were taken throughout the session
 - Data collection occurred between October and November 2023.

- Data Analysis:**
- Themes were identified through open-ended questions to gain more knowledge on individual experiences of a rural occupational therapist.
 - Pre and Post surveys analyzed using Likert scales

LIMITATIONS

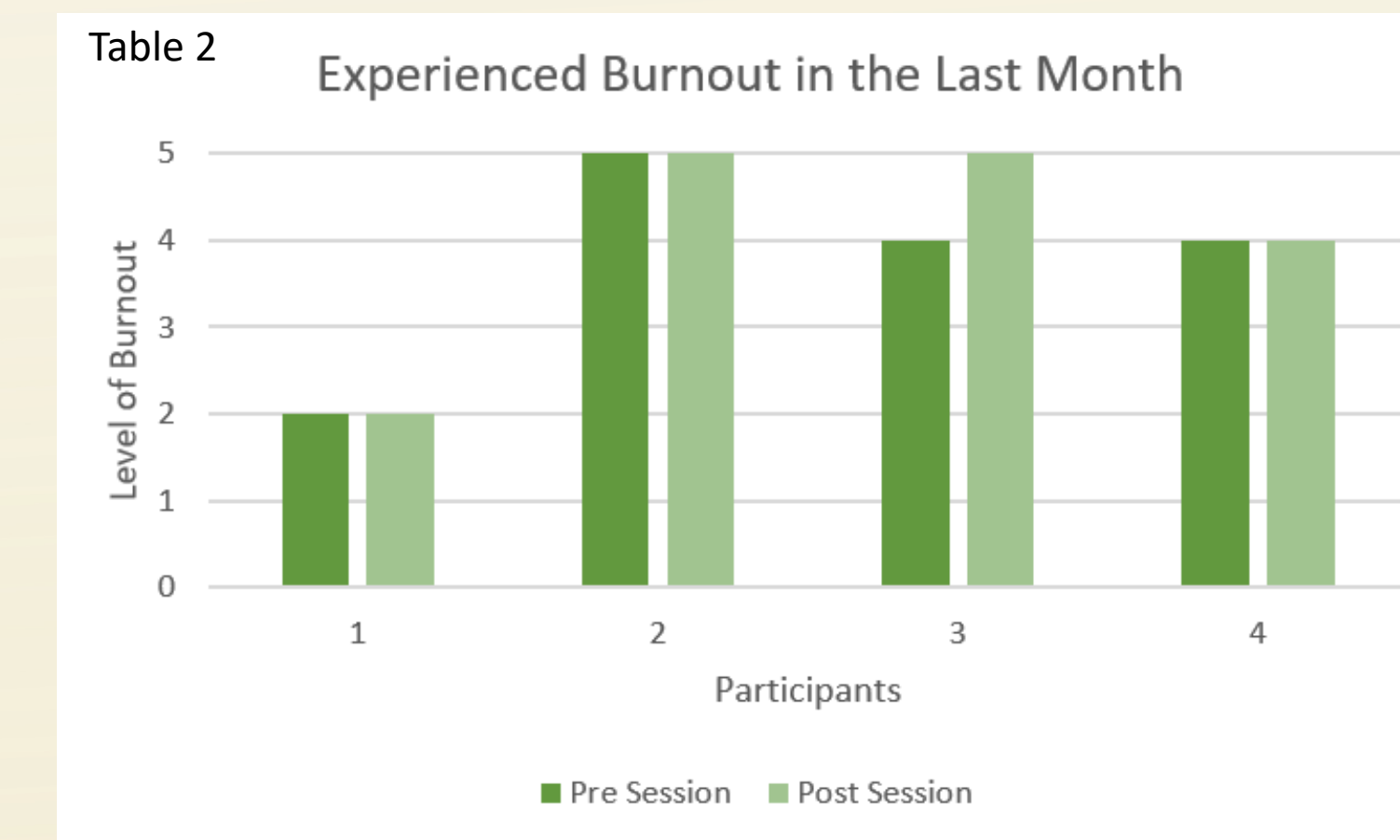
The small number of participants were obtained from a convenience sample which may impact generalizability to larger population of rural occupational therapists. All participants are employed through the same healthcare system which may also impact generalizability. With virtual meetings, there is always risk of technology barriers including internet access, video and microphone functions.

RESULTS

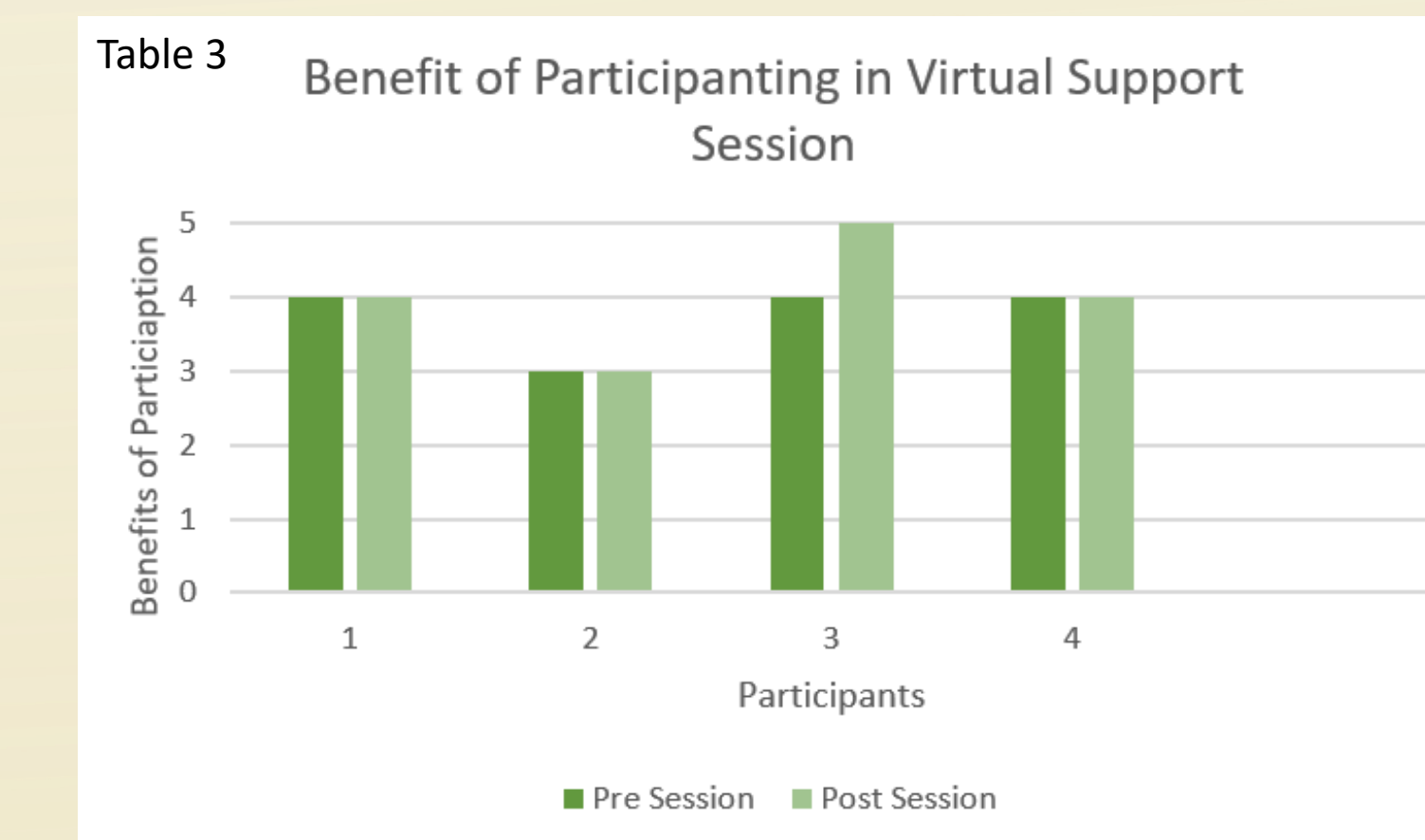
Themes identified included: variety of rural setting, sharing of resources/protocols. All participants expressed they enjoy the variety that the rural setting provides. Participants identified that they would benefit from additional tools and resources at their rural facility as demonstrated in Table 1. There were two resources shared electronically with completion of this session to build upon their resources at their site.



Seventy five percent of participants reported experiencing burnout within the last month, identified in Table 2.



Therapists felt that participating in virtual supportive sessions with other rural occupational therapists would be beneficial for them. Pre and post survey results identified in table 3. During discussion, all participants verbalized interest in attending future sessions.



SUMMARY

The results of this project support continuation of rural support sessions to decrease factors contributing to burnout out by improving support, providing networking opportunities as well as resources to therapists to positively impact the therapists and the patient's seeking services in rural settings.

REFERENCES

Doyle, N. W., Gafni Lachter, L., & Jacobs, K. (2019). Scoping review of mentoring research in the occupational therapy literature, 2002-2018. *Australian Occupational Therapy Journal*, 66(5), 541-551. <https://doi-org.exproxy.baylor.edu/10.1111/1440-1630.12579>

Health workforce burn-out. (2019). *Bulletin of the World Health Organization*, 97(9), 585-586. <https://doi-org.exproxy.baylor.edu/10.2471/BLT.19.020919>

Lee, S., & Mackenzie, L. (2003). Starting out in rural New South Wales: The experiences of new graduate occupational therapists. *Australian Journal of Rural Health*, 11(1), 36-43. <https://doi-org.exproxy.baylor.edu/10.1046/j.1440-1584.2003.00476.x>

Mills, A., & Millsteed, J. (2002). Retention: An unresolved workforce issue affecting rural occupational therapy services. *Australian Occupational Therapy Journal*, 49(4), 170-181. <https://doi.org/10.1046/j.1440-1630.2002.00293.x>

Park, E. Y. (2021). Meta-analysis of factors associated with occupational therapist burnout. *Occupational Therapy International*, 2021, 1-10. <https://doi-org.exproxy.baylor.edu/10.1155/2021/11226841>

Peterson, C., Ramm, K., & Ruzicka, H. (2003). Occupational therapist in rural healthcare-A “jack of all traits”. *Occupational Therapy in Health Care*, 17(1), 55-62. <https://doi.org/10.1080/00301700170105>