Outcome Measures in Physical Therapy Management of Patients in Acute Care Hospitals

CONTROL ID: 2341380

AUTHORS/INSTITUTIONS: T. Bachman, K. Mann, H. Metzner, K. Whitcher, R. Martin, J. Hale, K.A. Gibbs, Physical Therapy, Texas State University, San Marcos, Texas

Purpose/Hypothesis: Outcome measures allow physical therapists to quantitatively document a patient’s level of function, determine the most effective interventions, determine the success of treatment, and confirm discharge planning. In the acute care setting, healthcare professionals have come to understand the significance of improving mobility quickly to facilitate appropriate patient discharge. Although physical therapists are encouraged to use outcome measures as a component of their daily practice, recent surveys reveal they do not consistently do so. The purpose of this study was to explore student physical therapist and physical therapist’s self-reported use of outcome measures in acute care hospitals, to determine student physical therapist perception of the use of outcome measures by their clinical instructors, and to determine the most frequently utilized outcome measures in acute care.

Number of Subjects: 13 Physical Therapy Students, 11 Physical Therapists

Materials/Methods: Two separate surveys were developed and disseminated via email link utilizing Snap11 Professional survey software to a convenience group of third year Doctor of Physical Therapy students and their respective physical therapist clinical instructors. Each survey contained questions regarding general demographics, caseload, self-reported use of outcome measures, and barriers to and facilitators for using outcome measures. The student survey contained additional questions regarding clinical instructor expectations, knowledge of outcome measures, and the use of outcome measures by clinical instructors. This study received exempt status by the Texas State Institutional Review Board.

Results: Twenty-four student and clinician surveys were returned, for an overall response rate of 62%. A total of 2/13 (15%) of students reported using and 2/13 (15%) reported witnessing
use of outcome measures; whereas, 9/10 (90%) of clinicians reported using outcome measures. Students reported using or witnessing use of 4 outcome measures, including Berg Balance Scale, Functional Gait Assessment, Timed Up and Go, and S-Stream. The most frequently used outcome measures reported by the clinicians include Activity Measure for Post-Acute Care, Berg Balance Scale, and Timed Up and Go.

**Conclusions**: Students and clinicians have very different self-reports on the use of outcome measures in the acute care setting. The percentage of outcome measures self-reported by clinicians was vastly higher than the percentage students reported witnessing during clinical experiences. More examination of the reasons for the difference between two groups’ self-reports would be of interest to determine where deficits lay.

**Clinical Relevance**: The benefits of the use of outcome measures remains clearly documented. Their use in acute care is valuable and clinicians report using them. It is possible that students may not realize that their clinical instructors are performing outcome measures and that students would benefit from stronger instruction and direction on the use and value of outcome measures.