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Development of a training programme for insurance physicians on acquired brain injury and return to work

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Submitted for publication.

Abstract

Objective

Development of a training programme to impart insurance physicians (IP)s knowledge about acquired brain injury (ABI) and return to work (RTW).

Methods

The training programme was developed in three steps: 1) formulation of learning objectives; 2) literature review and consultation with educational experts; and 3) realization of the training programme.

Results

Step 1) the learning objectives were: IPs are aware of the causes, consequences, and impact of ABI; IPs know which aspects of ABI are relevant for RTW; and IPs know which interventions can affect the work capacity and long-term prognosis of patients with ABI. Step 2) the teaching methods in this training programme comprise a combination of several active components, for example, interactive exercises and case scenarios. Step 3) the one-day, four-hour 'ABI and RTW' training programme for IPs consists of four parts, which correspond to the learning goals and the core tasks of IPs.

Conclusions

The one-day, four-hour multifaceted, interactive, 'ABI and RTW' training programme was developed for IPs and based on effective teaching methods from the literature, learning theories, and educational expert's advice. This study underlines the significance of providing a link to daily practice when developing a training programme for IPs.

Introduction

Insurance physicians (IPs) assess patients on long-term sick leave who apply for disability benefits. IPs consider a patient's functional abilities and limitations, evaluate the return to work (RTW)-process, and determine whether RTW is an achievable aim. As a result of these assessments, patients either need to RTW or are exempt from RTW and granted disability benefits. IPs see patients with a broad range of disorders and base their assessments on their knowledge about these disorders, with a focus on RTW. IPs' assessments may sometimes be complex, particularly in the case of acquired brain injury (ABI). ABI has a broad spectrum of manifestations that can be discrete or even undetectable, and it is therefore particularly difficult for IPs to assess patients with ABI.

Scientific knowledge about ABI and RTW—specifically of aspects of ABI that are relevant for RTW and of effective RTW-interventions for patients with ABI—can help IPs to identify patients for whom RTW may be problematic, and to evaluate whether adequate care was or can be provided to facilitate RTW [1-5]. As a next step, IPs need to apply the available knowledge in practice. However, the use of scientific knowledge in occupational and healthcare practice is known to be limited [6-13], and thus there is a gap between the available knowledge and the actual care provided in practice.

In order to narrow the evidence practice gap and to address the related barriers [14-19], a training programme focusing on how IPs can obtain knowledge about ABI and RTW can offer a solution, since it has been shown that merely disseminating scientific knowledge, for example, through printed educational materials, is not sufficient to change the behaviour of occupational healthcare professionals [20-23]. The way knowledge can be applied in practice could be established as a training programme that integrates learning and practice [24,25]. It was demonstrated that such training programmes provide participants an opportunity to link new knowledge to prior knowledge and experiences [26-28]. Furthermore, training programmes enable participants to reflect on application in practice [29]. Therefore, a training programme is needed that addresses IPs' lack of knowledge about ABI and RTW, and teaches IPs how to apply this knowledge in assessments of patients with ABI.

For the specific context of IPs' assessments of patients with ABI, it is not known how best to train IPs to gain specific knowledge about ABI and RTW, and which are the best training methods to impart this knowledge.

The aim of the present study was to develop a training programme and to address the following research question: What elements and aspects must be integrated into a training programme for IPs in order to facilitate the application of knowledge about ABI and RTW in their practice?

Methods

The training programme was developed in three steps: 1) formulation of learning objectives; 2) selection of teaching methods tailored to IPs; 3) realization of the training programme.

Step 1. Formulation of learning objectives

The available knowledge about ABI and RTW, obtained from recent research projects [1-5], formed the basis for the learning objectives and the scientific content of the training programme.

IPs' scope of professional practice was considered and the content relevant for the assessment of patients with ABI was distributed over four topics: 1) what ABI is; 2) evaluation of the RTW-process; 3) assessment of work capacity; and 4) assessment of medical prognosis and prognosis of functioning.

Step 2. Selection of teaching methods tailored to IPs

In order to achieve the learning objectives through proven effective methods that are tailored to IPs, the research team made an inventory of available resources in PubMed about effective teaching approaches [20-23,30,31] and learning theories [32-37].

Methods and theories that could be applied to enhance IPs' learning were selected from these resources.

To supplement the findings from the literature survey with practical experience, three educational experts were consulted through the professional network of the research team: 1) A physician and professor of medical education and training, with specific expertise in teaching evidence-based medicine, the way physicians learn, and the application of research findings in training programmes for general practitioners; 2) a staff member at the department of continuing medical education (CME) of a large university hospital, with expertise in the design of training programmes for general practitioners; and 3) a chief of the educational department of a large organization that employs IPs, with expertise in the design, development, and implementation of educational interventions for IPs.

The experts were asked what they considered the appropriate strategies to teach healthcare professionals, like IPs, based on their scientific and practical experience, and their familiarity with the professional context of IPs.

Step 3. Realization of the training program

Based on the results of the scientific literature study [20-23,30,31], learning theories [32-37] and the advice from the educational experts, the training programme—including learning objectives and training activities to achieve the learning objectives—was realized.

Results

Step 1. Formulation of learning objectives

The learning objectives are:

Regarding ABI

- IPs know what ABI is (knowledge)
- IPs know the causes of ABI, the consequences of ABI, and the impact of ABI on RTW (knowledge)

Regarding evaluation of the RTW-process

- IPs know what factors are relevant for RTW (knowledge)
- IPs know the facilitators of and barriers to RTW and are aware of solutions to RTW-problems, according to patients and employers (knowledge)
- IPs know which effective RTW-interventions can be provided in the RTW-process (knowledge)
- IPs know how multidisciplinary care is organized in the RTW-process (knowledge)
- When IPs evaluate the RTW-process in a case scenario, they are able to recognize which aspects hinder RTW, and which solutions and effective interventions can be provided in the RTW-process and by whom (comprehension)

Regarding assessment of work capacity

- IPs know the impact of ABI or comorbidities on work capacity (knowledge)
- IPs know which work-related aspects can hinder functioning and which work adjustments can be applied (knowledge)
- When IPs assess work capacity in a case scenario, they are able to recognize relevant consequences of ABI or comorbidities that affect work capacity, which work-related aspects can hinder functioning, and which work adjustments can be applied (comprehension)

Regarding assessment of medical prognosis and prognosis of functioning

- IPs know which aspects can affect the long-term prognosis of the medical situation and the functional capacity (knowledge)
- IPs know which interventions can improve the long-term prognosis of the medical situation and the functional capacity (knowledge)
- When IPs assess the medical prognosis and the prognosis of functioning in a case scenario, they are able to recognize relevant aspects that can affect the long-term prognosis of the medical situation and the functional capacity, and are able to advise on the application of interventions to improve the long-term prognosis (comprehension)

Step 2. Selection of teaching methods tailored to IPs

Effective teaching approaches from the scientific literature

IPs participate regularly in education to keep up to date with advances in the field, which is line with CME. CME programmes improve the knowledge and performance of physicians [20,21,30,31] and other healthcare professionals [20,31], as demonstrated by three systematic reviews of systematic reviews [20,21,30] and one integrative review [31]. Performance improvement was greater when CME was interactive, multifaceted [20,21,30,31], and lasted longer [21]. Various methods were identified as effectively improving knowledge and performance, such as case-based learning in small groups, interaction with peers and group discussions [20,30,31], problem-based learning [21], lectures [20,21,30], audit and feedback [20,21,30,31], and interactive techniques [21]. In addition, didactic presentations [21] or printed educational materials, when applied as a single method, have no [22] or only a small positive effect on professional practice outcomes [20,21,23].

Learning theories

Insight into how adults learn and their learning context assists in tailoring a training programme to the target audience [32-37]. In line with the adult learning theory, adult learners [32-37]:

- are motivated to learn when the imparted knowledge is essential to them and related to the situations they encounter in their daily work
- need support from their peers during learning
- need to learn in small groups to apply imparted knowledge in a case scenario and to share learning experiences
- need coaching during learning and feedback on their performance

Educational expert consultation

According to the educational experts, a training programme needs to be relevant for the daily practice of IPs. The experts underlined the importance of focusing on practical applicability and advised introducing realistic case scenarios to enable participants to apply imparted knowledge. According to the experts, IPs (and other adult learners) need a safe and comfortable learning environment and prefer to learn in small groups, supported by peers.

The experts stated that occupational healthcare professionals, such as IPs, prefer face-to-face training and active training methods, for example, exercises and quizzes. The experts advised starting with a quiz to provide IPs and teachers with insights into participants' level of knowledge gaps, which motivates participating IPs to learn. According to the experts, adult learners (including IPs) appreciate knowing how well they are performing and need feedback from their teachers. Lectures should be interactive and last no longer than 20

minutes. One expert advised creating a summary of imparted knowledge, which would enable IPs to find information quickly, as IPs have to deal with patients suffering from a broad range of diseases.

Step 3. Realization of the training programme

The findings from the literature and the educational experts' advice were integrated into the 'ABI and RTW' training programme for IPs. The training programme takes four hours (including a 30-minute break) and consists of four parts, each of which corresponds with one of the core tasks of IPs.

The learning objectives generated in the first step were aligned with proven effective training methods and learning circumstances that best suit IPs to optimize the learning process, such as quizzes and case scenarios in small groups. The 'ABI and RTW' training programme is illustrated in Table 1.

Table 1. The one-day, four-hour 'ABI and RTW' training programme plan for IPs

Topics related to IPs' professional tasks	Teaching methods	Time
Introduction		5 mins.
ABI	– Interactive lecture	10 mins.
Evaluation of the RTW- process of patients with ABI	– Interactive lecture – Quizzes – Exercises – Simple case scenarios in small groups – Plenary feedback – More complex case scenarios in small groups, facilitated by instructor – Plenary feedback – Plenary discussion – Reflection on own practice	1.5 hrs.
Assessment of work capacity of patients with ABI	– Interactive lecture – Quizzes – Exercise – Case scenarios in small groups – Plenary feedback – Plenary discussion – Reflection on own practice	1 hr.
Assessment of medical and functional prognosis of patients with ABI	– Interactive lecture – Quizzes – Exercise – Simple case scenarios in small groups – Plenary feedback – More complex case scenario derived from daily practice in small groups, facilitated by instructor – Plenary feedback – Plenary discussion – Reflection on own practice	1 hr.

In addition, a course syllabus detailing the training programme was composed in order to assure reproducibility and to facilitate a broader implementation in the future.

Discussion

The aim of this study was to develop a training programme to impart IPs knowledge about ABI and RTW, and to teach them how to apply this knowledge in practice. It resulted in the one-day, four-hour 'ABI and RTW' training programme for IPs, which consists of multifaceted and interactive teaching approaches.

These multifaceted and interactive teaching approaches were derived from the literature, specifically from reviews of reviews [20,21,30] and an integrative review that bundled the results of systematic reviews and randomized controlled trials [31]. The use of the literature is a strength of this training programme, as the conclusions concerning the effectiveness of the interventions included in these studies were based on a large number of study participants [20,21,30,31]. However, the results of these studies alone were not sufficient to develop the training programme, as it was not clear in what context and under what conditions these teaching approaches were most effective [21]. Therefore, and specifically in order to tailor the programme to IPs, learning theories were considered [32-37] and experts were consulted. This mixed methods approach, resulted in a multidimensional understanding of elements that could be used in this training programme for IPs. A link to practice is provided in this way, which is in line with adult learning theory [32-37]. In addition, case-based learning methods give participants the opportunity to interact in small groups, and to connect new material with prior knowledge and to integrate it, in line with constructivism [26-28].

The topics of the training programme are related to IPs' assessments in practice.

The purpose of the training programme is to transfer knowledge for use in practice, although it is realized that imparted knowledge is potentially not completely new for IPs, as they often already have some knowledge of ABI and RTW. The training programme is aimed to fill the knowledge gaps and to build on prior knowledge.

A one-day training programme lasting for a few hours could be perceived as a limitation, but a limited time frame is sufficient, as IPs are capable of adopting the imparted knowledge in conjunction with previous knowledge [24,38-40]. This was demonstrated in earlier studies about training programmes imparting knowledge for physicians' daily practice [24,38-40]. The short duration of these training programmes did not hinder effective knowledge increase [24,38-40]. In addition, IPs in this study were introduced to the training programme content through reading assignments in advance, which allowed to save time for aspects that could increase the effect of short training programmes, such as reflective, interactive exercises and integrating learning and practice through case scenarios [41]. The

training programme was mainly developed to increase the knowledge of IPs about ABI and RTW, which is useful for use in practice. Four aspects seem to be important to transfer knowledge in practice and to change healthcare professionals' behaviour: 1) identification of barriers, 2) choice of intervention components, 3) use of theory, and 4) engagement of end-users [42]. These aspects were also addressed in the development of this training programme aimed to remove a barrier, namely IPs' lack of knowledge about ABI and RTW, resulting in learning objectives related to IPs' professional tasks, which was achieved through effective teaching strategies derived from the scientific literature. In addition, the training programme was tailored to IPs based on learning theories [42]. A systematic stepwise approach as applied in this study is recommendable, as it provides insight into the development of the programme, which is often reported to be poorly described in previous studies [43]. Insight into the development of a training programme may allow its understanding [44] and reproducibility, and enable tailoring of the training programme to other contexts [45,46].

Conclusions

A multifaceted, interactive, one-day, four-hour case-based 'ABI and RTW' training programme for IPs was designed, based on the latest scientific insights into the training and education of occupational and other healthcare professionals, on learning theories from the literature, supplemented with advice from educational experts. This study highlights the importance of selecting active teaching methods and creating a link to daily practice when designing a training programme for health care professionals.

Practice points

- Teaching methods for professionals are most practical when they are based on proven effective teaching strategies combined with the practical experience of experts in teaching and education
- Effective teaching methods for professionals are interactive and multifaceted, and comprise interactive lectures, exercises, and case-based and peer-group learning
- Case-based learning methods assist training programme developers to provide a link to practice

Declaration of interest

The authors report no declarations of interest.

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