

Occupational Therapy Students' Perspectives on Interprofessional Education

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Abstract. *Background.* Interprofessional education (IPE) promotes collaboration in healthcare to improve patient outcomes. Despite its importance, little is known about Occupational Therapy (OT) students' IPE experiences, revealing a critical gap in IPE curriculum. *Purpose.* This study explored McMaster University's Masters of Science in OT (MSc(OT)) students' IPE perspectives at: 1) program entry; 2) partial program completion; and 3) comparisons across timepoints. *Methods.* This two-part study assessed IPE readiness using the Readiness for Interprofessional Learning Scale (RIPLS). Part one analyzed retrospective, cross-sectional MSc(OT) students' data at program entry using ANOVA and Bonferroni tests. Part two analyzed a prospective survey at partial program completion using Two-Sample t-Tests. *Findings.* Mean and standard deviation (SD) total RIPLS scores at entry were 81.3 (9.7), with minimal variation across classes and COVID periods. At partial program completion, mean (SD) total RIPLS scores declined significantly to 80.3 (9.0); three subscales (Teamwork and Collaboration, Negative and Positive Professional Identity) also decreased, while Roles and Responsibilities increased. Open-text responses highlighted positive and negative IPE experiences. *Conclusion.* MSc(OT) students consistently began the program with high IPE readiness, except in 2020. IPE readiness declined at partial program completion suggesting gaps in curriculum integration, which supports the need for continuous and structured IPE to sustain student engagement and collaborative competency.

INTRODUCTION

Interprofessional education (IPE) “occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes” (p.10)¹. The goal of IPE is to foster a culture of mutual respect between various healthcare professionals and promote teamwork, communication, and optimize patient care². IPE has become an integral component of occupational therapy (OT) curricula in Canada; for example McMaster University's OT program has incorporated interprofessional learning (IPL) opportunities within the curriculum through understanding professional roles and collaborating effectively. However, there is currently limited knowledge about IPE within OT. This study aimed to determine McMaster University's Masters of Science in OT (MSc(OT)) students' readiness, perceptions, and attitudes towards IPE through three objectives: to understand IPE perspectives 1) at program entry; 2) at partial completion of the program; and 3) to compare the two timepoints. This information will identify strengths and gaps in training and improve curriculum design.

METHODS

This two-part study utilized the Readiness for Interprofessional Learning Scale (RIPLS) questionnaire to assess IPE readiness, with higher scores reflecting a higher level of readiness³. The RIPLS consists of four subscales: Teamwork and Collaboration (T&C), Negative Professional Identity (NPI), Positive Professional Identity (PPI), and Roles and Responsibilities (R&R)³. This tool has been validated across multiple health disciplines, including OT⁴.

Part 1: Retrospective Data 2019-2024

The Program for Interprofessional Practice, Education, and Research (PIPER) invited incoming MSc(OT) students to participate in a survey assessing IPE readiness and perceptions. This study utilized the incoming data from PIPER from 2019-2024, and was informed from previous work on IPL readiness in health science students⁴. **Data Analysis.** RIPLS data were compared across classes using ANOVA and Bonferroni

tests. Total and subscale RIPLS scores were reported as means with standard deviations (SD). To analyze the impact of COVID, RIPLS data was compared across three timepoints: 1) before (2019); 2) during (2020-2022); and after COVID (2023-2024).

Part 2: Prospective Data (Cohorts 2025, 2026)

A prospective cross-sectional survey was developed and administered to current MSc(OT) students in cohorts 2025 and 2026. The 2025 cohort of MSc(OT) students were the same students who completed the incoming PIPER survey in 2023, while the 2026 cohort completed the incoming PIPER survey in 2024. **Survey Components.** The online survey, administered through LimeSurvey, included demographic information, the RIPLS, and five open-text questions regarding experiences in IPE, if current IPE opportunities were meeting needs, IPL priorities, and facilitators and barriers to IPE readiness. **Data Analysis.** RIPLS data was statistically analyzed using Two-Sample t-Tests to compare program years across each RIPLS subscale. A comparison of RIPLS scores from the retrospective dataset and prospective data was completed to analyze changes in IPE perceptions from program entry to partial completion. Total RIPLS scores and subscale scores for each program year were calculated as means with SD. Common concepts of IPE perceptions, facilitators, and barriers were also reviewed from the open-text responses.

RESULTS

Part 1: Retrospective Data 2019-2024

Participants. Between 2019 and 2024, n=220 (55.7%) incoming MSc(OT) students completed the PIPER survey. The mean (SD) age was 24.2 years (3.0), with 174 (79.1%) identifying as women. **RIPLS 2019-2024.** The overall total mean (SD) RIPLS score at program entry was 81.3 (9.7). Mean subscale scores at entry were: T&C=39.6 (5.8), NPI=13.2 (1.7), PPI=17.0 (3.1), and R&R=11.5 (1.7) (Figure 1). **RIPLS Across COVID.** Mean (SD) total RIPLS scores declined across COVID periods: 84.0 (5.5) before COVID (2019), 79.0 (11.8) during COVID (2020-2022), and 83.4 (6.7) after COVID (2023-2024). T&C and PPI scores

dipped during COVID, then rebounded after COVID. NPI and R&R scores remained relatively stable throughout COVID time periods (Figure 2).

Figure 1: RIPLS 2019-2024

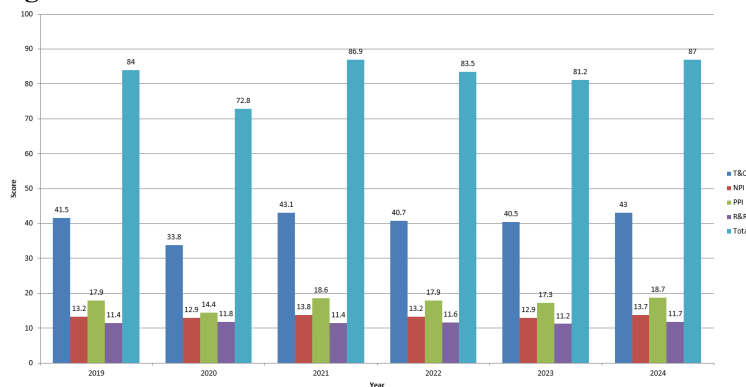
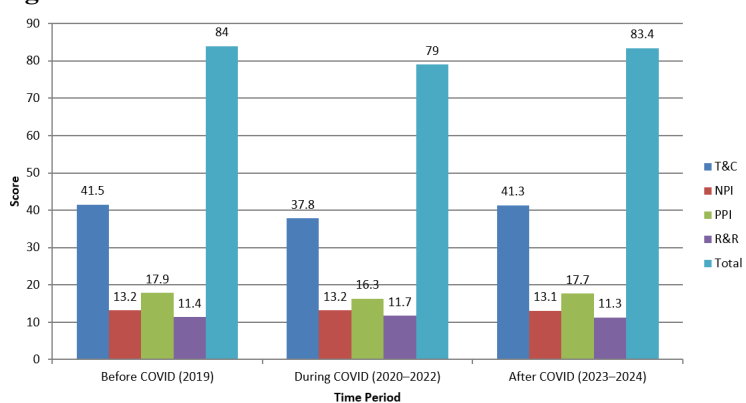


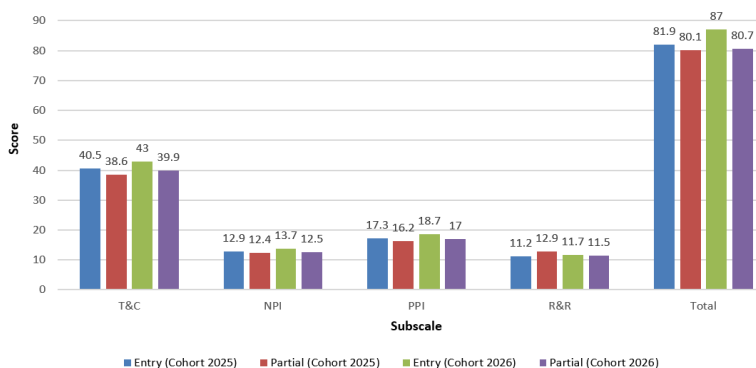
Figure 2: RIPLS Across COVID



Part 2: Prospective Data (Cohorts 2025, 2026)

Participants. A total of n=62 (45.3%) current MSc(OT) students participated in the survey. The mean (SD) age was 25.9 years (2.8), with 56 (93.3%) identifying as women. **Program Entry vs Partial Completion.** **Cohort 2025** entry scores (n=49) showed a mean (SD) RIPLS total of 81.9 (6.7), with subscales: T&C=40.5 (3.1), NPI=12.9 (2.0), PPI=17.3 (1.8), and R&R=11.2 (2.0). At partial completion (n=38), scores declined: total=80.1 (9.6), T&C=38.6 (6.6), NPI=12.4 (1.7), PPI=16.2 (2.4), but R&R increased to 12.9 (1.4). **Cohort 2026** entry scores (n=21) showed a mean (SD) RIPLS total of 87.0 (5.2), with subscales: T&C=43.0 (2.6), NPI=13.7 (1.4), PPI=18.7 (1.7), and R&R=11.5 (1.5). At partial completion (n=22), all scores declined: total=80.7 (8.0), T&C=39.9 (3.7), NPI=12.5 (1.8), PPI=17.0 (2.1), and R&R=11.5 (1.8) (Figure 3).

Figure 3: Program Entry vs Partial Completion



Student Feedback. A portion of the students (n=26, 41.9%) reported IPE did not meet their IPL needs, citing lack of depth, integration, and scheduling challenges. However, some (n=23, 37.1%) described that IPE met their needs through improved collaboration and professional role clarity. Timing, previous experiences, and institutional initiatives emerged as key facilitators and barriers to effective IPE.

DISCUSSION

Incoming Classes (2019–2024). Total and subscale RIPLS scores across incoming MSc(OT) classes from 2019 to 2024 remained consistently high, with the exception of a dip in 2020. This was likely due to COVID disruptions (i.e., remote learning, reduced interprofessional engagement^{4,5}). However, scores rebounded in 2021 and remained high through 2024, indicating high IPE readiness in MSc(OT) students. **Subscales.** T&C and PPI were most impacted in 2020 but recovered in 2021 and reached peak scores in 2021 and 2024, reflecting a positive impact of COVID on IPE⁵. This dip and recovery pattern matched the pattern of total RIPLS scores. NPI and R&R showed year-to-year consistency, suggesting they may be less sensitive to external disruptions. **Entry to Partial Program Completion.** Both 2025 and 2026 cohorts showed declines in total RIPLS scores and most subscales from entry to partial completion. Particularly, cohort 2026 experienced significant decreases in T&C and PPI. These trends may reflect a mismatch between MSc(OT) students' early optimism and actual IPE experiences.

CONCLUSION

This study shows McMaster University's MSc(OT) students consistently enter the program with high IPE readiness, however this declines at partial program completion. This emphasizes the need for consistent, integrated IPE throughout the program, such as strengthening longitudinal, experiential IPE and embedding it in clinical settings, to better sustain student engagement and learning outcomes⁶. Future research should examine the impacts of IPE readiness on clinical performance and collaboration.

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