THE UNIVERSITY OF CHICAGO
UChicago Medicine
Center for Healthcare Delivery Science and Innovation

Orthotic Ambassador Training (OAT) Program

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Problem

- **Decreased Occupational Therapist (OT) confidence** with orthotic fabrication across the acute care department
- **Increased clinician burnout** among OTs who are highly skilled and frequently relied upon for fabrication
- **Cross-coverage challenges** during both weekdays and weekends
- **Patient safety concerns**, including risk for pressure-related injuries
- **Variation in clinical decision-making** and orthotic fabrication among less experienced clinicians
- **Limited safeguards and transparency** to ensure orthotics are appropriately designed, fabricated, and monitored

Opportunity: Standardize orthotic fabrication processes, improve clinician support and competency, and establish safeguards to promote **safe, consistent, and high-quality patient care**.

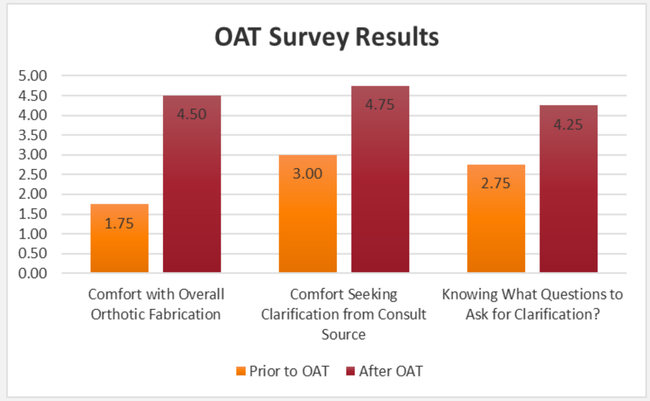
Goal

- Improved consistency and safety with orthotic fabrication, reducing pressure related injuries
- Strengthen cross coverage for orthotic fabrication and management 7 days per week
- Build department wide competency through standardized education, training, mentoring and skill development
- Establish designated orthotic mentos to support, coach and guide less experienced clinicians
- Create a sustainable support structure that promotes confidence, quality and shared expertise across the department

Intervention Design

- Revised previous OT Orthotic Competency to a two-tier system which distinguishes between basic and advanced competency
- Standardized documentation approach in EHR for orthotic fabrication to include photograph and formal wearing schedule
- Created and administered a pre survey to assess therapists' comfort with orthotic fabrication and management
- Selected 4 OTs to participate in OAT program. Chosen based on interest, service requirements and proximity to patient population
- Implemented "Emersion Program". Selected therapist participated in targeted pre-education and subsequently fabricated all requested orthotics within the acute care setting (~2-3 months/each)
- Tracked all fabricated orthotics completed during emersion period including tracking of competency scores on a 1-5 standardized scale
- Assessed program impact

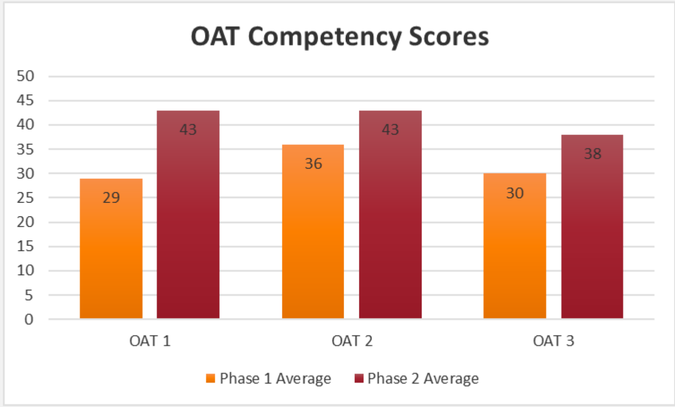
Survey Results





Results

- Survey results demonstrated increased confidence related to orthotic fabrication, management, clinical decision making, and interactions with interdisciplinary team after program completion
- Overall competency scores improved for all orthotics fabricated and OAT required less assistance from senior mentor over time
- Ambassadors were able to fabricate orthotics from straight forward to complex, across various services lines (PRS, ortho)
- **100% compliance** with completion of standardized documentation (photographs and Therapy Services Wearing Schedule) in EHR



Conclusions

- Participant scores throughout the individual rotation demonstrated improvements
- Post OAT survey demonstrated improvements in confidence level with orthotic fabrication, discussion with interdisciplinary team members and with overall clinical judgement
- OATs reported improved confidence with proper selection of orthotic material
- Increased number of competent OTs with skill and competence to fabricate orthotics within the acute care setting
- Reduction in orthotic pressure related injuries d/t improper donning of orthotics

Next Steps

- **Optimize OAT training duration** by identifying the number and types of orthotics needed to achieve competency
- **Develop a graduated mentorship pathway** that allows experienced OATs to mentor and support future participants
- **Create a standardized orthotic documentation flowsheet** to streamline documentation, improve consistency, and enable future data extraction and quality monitoring

Acknowledgements

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