

365

EVIDENCE-BASED PRACTICE (EBP) COURSE IN UNDERGRADUATE PHYSICAL THERAPY PROGRAMS IN PRIVATE HIGHER EDUCATION INSTITUTIONS IN BRAZIL

Nívea Renata Oliveira Monteiro¹, Wueyla Nicoly Nascimento Santos¹, André Silva Sousa¹, Maycon Sousa Pegorari², Daniela Gonçalves Ohara², Areolino Pena Matos¹

¹ Federal University of Amapá (UNIFAP), Macapá, Amapá, Brazil

² Federal University of Triângulo Mineiro (UFTM), Uberaba, Minas Gerais, Brazil

Background: Evidence-based practice (EBP) is fundamental for effective healthcare delivery, and its teaching has been progressively adopted in higher education in health sciences worldwide. In Brazil, private higher education institutions (HEIs) play a significant role in health education, and although national curriculum guidelines recommend decision-making based on scientific evidence, there are no specific guidelines for the curriculum implementation of EBP as a course. The presence of EBP as a component of the curriculum in undergraduate physical therapy programs in these institutions is still unknown.

Objectives: To investigate the presence of EBP-specific-course in undergraduate physical therapy programs in private HEIs in Brazil and the content offered in the courses.

Methods: This is a cross-sectional study that used the e-MEC National Register of Higher Education Courses and Institutions to search for undergraduate physical therapy programs recognized by the Ministry of Education, until March 2021. Curricula of face-to-face undergraduate programs that provided curriculum information via website or e-mail were included for analysis. Curricula that contained references, mentions or citations of exact term or synonymous to "Evidence-based clinical practice" were analyzed to identify the course in which the content was offered. Subsequently, the available syllabus of EBP specific course were analyzed to identify terms related to the five steps of EBP (Ask, Acquire, Appraise, Apply, Assess) Descriptive analysis was performed using absolute and relative frequencies. Mean and standard deviation were used to report the workload of EBP course.

Results: A total of 1033 regular undergraduate physical therapy programs were found on the Ministry of Education website. Out of these, 809 curricula were included and evaluated. A total of 739 (91.3%) programs were identified as private HEIs. Nearly half of the programs (352/47.6%) are located in the Southeast region of the country. Only 66 (8.9%) programs had an EBP-specific course, offered mainly in the fifth year (30/46.9%) and fourth year (20/31.3%) of the undergraduate program, with an average workload of 44.3±11.8 hours. Proportionally, a higher number of EBP courses are located in the Northern region (10/22.2%) and Northeast region (29/16.6%). Only five (7.6%) programs provided the complete syllabi. All programs mentioned the critical appraisal and application steps, 4 (90%) mentioned the acquire step, 3 (60%) mentioned the ask step, and Only 2 (40%) mentioned the evaluation step.

Conclusion: The presence of EBP-specific course in undergraduate physical therapy program in HEIs is still inadequate, and the majority of programs that include them do not fully incorporate all of their steps. The deficiency in teaching content related to EBP at the undergraduate level can negatively impact the clinical decision-making of new professional and the healthcare delivery.

Implications: The results of this study promoted the understanding of the scenario of EBP teaching in undergraduate physical therapy programs in HEIs of the country, revealing the need for curriculum adjustments to promote evidence-based practice.

Keywords: Curriculum, Evidence-Based Practice, Undergraduate Physical Therapy Program

Conflict of interest: The authors declare no conflict of interest.

Acknowledgment: Not applicable.

Ethics committee approval: Federal University of Amapá (protocol 4.763.025).

<https://doi.org/10.1016/j.bjpt.2024.100951>

366

PROFILE AND OPINION OF HEALTH PROFESSIONALS ON THE USE OF THE INTERNATIONAL CLASSIFICATION OF FUNCTIONALITY IN THE HOSPITAL FIELD

Pâmela Selau Bittencourt¹, Camila Mascarelo Panisson¹, Tatiana Dias de Carvalho¹, Livia Arcêncio do Amaral²

¹ Programa de Pós-Graduação em Ciências da Reabilitação, Universidade Federal de Santa Catarina (UFSC), Campus Araranguá, Santa Catarina, Brasil

² Departamento de Ciencias de la Salud, Licenciatura en Kinesiología y Fisiatría, Universidad Nacional de La Matanza, San Justo, Buenos Aires, Argentina

Background: The International Classification of Functioning, Disability, and Health (ICF) was created with the intention of providing a detailed assessment of functioning, ease of recording, and communication between the team.

Objectives: To describe the profile and opinion of health professionals about the use of the ICF in the hospital environment.

Methods: This is an observational, descriptive, cross-sectional study, carried out with Brazilian health professionals who work in the hospital environment. Individuals not residing in the country and unfinished surveys were excluded. An online survey was applied via an electronic form consisting of 22 questions divided into 3 sections: characteristics of the guides, knowledge, and use of the ICF. Questions related to age, gender, trail area, maximum title, length of experience, knowledge, and use of the ICF were defined for the professionals' profiles. Professionals who know the ICF were divided into two groups (1- already used the ICF in the hospital environment; 2- never used it) to compare their profiles and opinion on the feasibility of using the ICF in the hospital environment. A descriptive analysis of the data was performed, with values expressed as median (25-75% percentile) and absolute (n), and relative (%) frequency using the SPSS Software version 22. For comparison and association, the Chi-square was used with a significance level of 5%.

Results: 510 health professionals participated in the study, 427 (83.7%) female. Of these, 316(62%) were nurses, 147(28.8%) were physiotherapists and 27(5.3%) were psychologists. As a maximum degree, 301 (59%) have specialization. 103(20.2%) worked in the hospital environment between 6 and 10 years, 101(19.8%) for more than 20 years, and 89(17.5%) between 2 and 5 years. Regarding knowledge of the ICF, 265 (52%) reported having prior knowledge. To assess knowledge of the ICF, of these 265 who know it, 49 individuals who did not respond about the feasibility of using it were excluded, leaving 216. Of those who know the ICF, 72 (33.3%) have known it for about 2 to 5 years, 73(33.8%) knew it during graduation and 87(40.3%) classified their knowledge as fair. Comparing groups 1 and 2, there was no significant difference in age, sex distribution, knowledge about core sets, the feasibility of using the ICF, and time of practice ($p < 0.05$). However, a significant part of group 2 had never been trained to apply the ICF [group 2, 94(79%) versus group 1, 47(48.5%), $p < 0.001$] and did not use the core sets [group 2, 115 (96.6%) versus group 1, 69(71.1%), $p < 0.001$].

Conclusion: Most professionals who responded to the survey were nurses. Most of the interviewees have specialization as their maximum degree and have been working in the hospital environment for