



2019 Duke AHEAD Grant Proposal
Due by 5:00 pm 06/24/2019

Check one:

- regular small Duke AHEAD grant - proposal with budget up to \$5,000**
 targeted IPEC Duke AHEAD grant - proposal with budget up to \$25,000

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Focused question: What are the facilitating factors, needs and challenges for creating and implementing an interprofessional ethics education curriculum for learners at the Duke University Schools of Medicine and Nursing, and how might this information be used to advance interprofessional ethics education at our institution?

Background: (including brief review of prior research)

One of DukeHealth's strategic goals, consistent with national trends, is to increase interprofessional education (IPE) and practice with the goal of optimizing patient care. Ethics is widely understood to be a foundational component of all health professions (Barlow, Hargreaves, & Gillibrand, 2018; Strawbridge, Barrett, & Barlow, 2014) and has convergent objectives with IPE (Machin et al., 2018). Varying professional perspectives on what is in the patient's best interest may lead to conflict, which in turn may induce stress and burnout. Teaching students to collaborate and communicate effectively, however, has the potential to create more supportive and resilient communities of health providers, in addition to improving patient care. These reasons compelled us to focus on ethics to advance IPE at Duke. A pilot study, conducted as part of the DukeAhead Certificate Program, explored the nature and extent of classroom-based ethics education in five programs at Duke University Schools of Medicine (SOM) and Nursing (SON) to determine a basis for creating an interprofessional curriculum for ethics education. It was found that ethics was taught exclusively to students in each program as a required part of the curricula. With regard to content, all programs included core ethical principles and explored ethical dilemmas using case studies, four programs included an approach or framework to guide ethical decision making in clinical practice, but only two of the five programs provided opportunities for students to identify their personal values and explore the implications for patient care, and only two programs required students to be familiar with their respective professional codes of ethics to gain insight into values that should guide professional attitudes and behaviors. Similarly, there was variation with regard to learning objectives, pedagogy and assessment. These findings highlight the opportunity to create a more comprehensive ethics

curriculum, including an interprofessional component, for use across the programs. Drawing on the results of this study, an approach to interprofessional education for ethics is proposed. This approach would begin with students exploring their personal values, followed by learning about ethical principles and concepts, profession-specific codes of ethics, frameworks for making ethical decisions, and related institutional and legal resources. This phase of the curriculum would be implemented within each professional student group to mitigate logistical challenges relating to scheduling and learning spaces. The interprofessional phase of the curriculum would follow, with students from the different programs coming together in small groups, either virtually or in person, to explore case-based and issue-specific ethical dilemmas relevant to all represented healthcare professions. These interprofessional groups would focus on management and ethical priorities from the perspective of each profession in the process of reaching a resolution to the ethical dilemma. According to Strawbridge et al. (2014), interprofessional debates for ethics foster students' critical thinking and create awareness of conflicting views regarding decisions that are possible. Finally, debriefing and feedback sessions facilitated by faculty would allow students to discuss their experiences, including what they learned, and how it might influence their future healthcare decisions, as well as how they were affected by the discussion (Machin et al., 2018). One way to implement this approach to ethics education would be through Team-based Learning (TBL). Program specific learning might occur and be evaluated through the readiness assurance tests, and the application phase of TBL would occur in an interprofessional educational setting.

Specific aims:

The literature and initial pilot study suggest that an interprofessional approach to ethics education would be beneficial to all learners. To implement the suggested approach, the unique facilitating factors, needs, and challenges of implementing this type of curriculum at Duke's SOM and SON has to be fully explored. This includes resources, as well as faculty skill and comfort with facilitating discussions regarding ethical dilemmas, core values, and shared decision making in an interprofessional setting. Our project includes the identification of the needs, challenges and facilitating factors for the proposed interprofessional ethics curriculum, and the implementation of a faculty development training session focused on small-group facilitation for guiding learners in the discussion of challenging ethical topics. Specific Aim #1: To identify facilitating factors, needs, and challenges to creating and implementing an interprofessional ethics education curriculum for learners at the Duke University Schools of Medicine and Nursing. Specific Aim #2: To create and implement a case-based simulation exercise for faculty development, which will address some of the main challenges identified, with the goal of training faculty to integrate IPE for ethics.

Project Plan, including brief description of steps and/or timeline:

The Duke University community provides a rich environment for IPE. There are, however, challenges inherent to implementing an IPE curriculum for ethics at Duke. The initial phase of our project will involve focus group discussions, with faculty from the various health professions education programs, to identify facilitating factors, needs, and challenges. 1. A semi-structured interview guide will be created, consisting primarily of open-ended questions focusing on needs, challenges and facilitating factors for implementing an IPE curriculum at Duke SOM and SON. 2. Stakeholders from the various health professions programs will be invited to participate in the focus group. 3. A summary of the existing state of ethics education at Duke and the proposed approach to interprofessional ethics education will be presented to the participants. 4. The semi-

structured interview guide will be used to facilitate the group interview which, with permission, will be recorded. 5. The focus group interview will be transcribed and qualitatively analyzed for themes. Faculty confidence and skill in facilitating interprofessional team discussions and activities is important for the success of an IPE curriculum, and may likely emerge as one of the perceived challenges. A faculty development simulation exercise will be created for this purpose. 1. A case involving an ethical dilemma will be developed for use in the simulation training. 2. Health professions educators will participate in a simulation exercise that will model an IPE class session, which will also address some of the challenges identified by the focus group. 3. The simulation and debriefing exercise will reflect the IPEC Core Competencies: a. Values/Ethics for Interprofessional Practice b. Roles/Responsibilities c. Interprofessional Communication d. Teams and Teamwork 4. Faculty will complete a pre and post-session self-efficacy survey that will focus on confidence in delivering an IPE ethics curriculum.

Outcome measures: (please select from among the following)

- Pre- and post-intervention/innovation surveys
- Qualitative analysis (including focus groups or interviews)
- Post-intervention/innovation satisfaction survey
- Attendance figures/usage data
- other (please provide a brief description – max 20 words)
-expert review of case based simulation to assess relevance of challenges identified by the focus group and consistence with IPEC competencies.

Resource needs and budget:

Funding will be available for a 12-month period. Please fill in the table below and provide justification/description for each item below. Additional budgetary support may be available through DASHE vouchers for editorial support, data management, education research commons, and more (see <https://dukeahead.duke.edu/how-we-can-help/duke-ahead-supporting-health-professions-educators>).

If submitting a proposal for a targeted IPEC grant, please provide an estimate of the time/effort you will expend on this project. PI support may not total more than 25% of the requested funds. If submitting a proposal for a regular (small) grant, PI may not request financial support and it is not necessary to estimate time/effort. Administrative support for either type of grant is available through “consultant costs.”

		Estimated Cost
PI support (for IPEC grant only)	[PI time/effort =]	\$0.00
Consultant Costs		\$3000.00
Equipment	Including books	\$500.00
Computer	Hardware (\$1500/laptop)	\$0.00
	Software	\$0.00
Supplies		\$500.00
Travel	(1,000/trip)	\$0.00
Other Expenses	Including food and standardized patients	\$1000.00
Total Costs for Proposed Project		\$5000.00

