2017 Full Submission

Title: Keepers of the House: A Unique Video-based Curriculum for Health Care Students and Professionals

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Other Collaborators:

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- Candace S. Brown, PhD, Post Doc fellow, Center for the Study of Aging and Human Development, Duke University
- Rhonda Klevansky, MA, documentary film maker

Focused Question: Our goal is to create a curriculum module for students and practitioners in a broad a range of health science professions. The module, consisting of a video and a teaching guide, will use documented stories of the human relationships between housekeepers and patients to encourage new ways of thinking about empathy, implicit bias, and teamwork.

Background: Every day of the week, environmental service workers enter hospital patients' rooms to clean. Their work brings a measure of dignity and connection to people who are sick, vulnerable, and away from their familiar homes. Because these workers are assigned to the same specific areas of the hospital, they often develop meaningful relationships with patients. Several months ago, we conducted a focus group in which environmental service workers at Duke Hospital described the importance of building relationships with patients and shared stories about the impact that patients and families had on them. We listened to compelling accounts about why they chose environmental service work in a hospital setting, and in many cases, their stories exemplified the sense of purpose that we endeavor to teach to our students in the health professions.

There are only several published studies on the relationships between housekeepers and patients. A study performed in a large university clinic in southern Germany, based on interviews and focus groups, noted that "cleaning staff described interactions with patients as an important and fulfilling part of their work" and made recommendations for additional training in communication skills for these housekeepers. (1) In a separate study, conducted at a US hospital, researchers noted that housekeepers may spend more time with patients than other members of the hospital staff, and that patients frequently disclose their anxieties about family and illness. (2). The authors went on to suggest that environmental service workers are potentially valuable sources of information, but are most often overlooked by other members of the care team. Schulman-Green et al. additionally noted that 'unlicensed staff members,' including housekeepers, have routine contact with patients in pain, and play an important role in alerting nursing staff and providing psychosocial support.(3)

Despite these insights, the roles of housekeepers in the support of patients and their families and as a potential source of vital health information are neither widely understood nor appreciated. Our curriculum module addresses this problem and opens the door between the professionals and the housekeepers who also care for the patient. This project will facilitate a shift in perspective on the part of nurses, physicians and other health care professionals by helping them recognize these additional members of their teams, and to broaden the concept of what we now call interprofessionalism.

The team working on our unique teaching module is multidisciplinary and includes two physicians, a physical therapist, and two social scientists with a special interest in empathic health care. The fifth member of our team is a photographer and documentary filmmaker who has produced a number of short films that tell stories related to humanism and social justice, and who has experience in medical education videography. (see attached letter)

As we began the research for our project, one employee with whom we spoke did not refer to himself as a "housekeeper," but rather as "the keeper of the house." His insight guided our vision in creating this original work.

A brief video interview with one of the housekeepers, which we will show at the Duke Health Humanities Lab national conference in mid-September is at https://vimeo.com/229540412 The password is 'keepers.'

Specific Aims:

1. Self- awareness. Learners will be able to consider their own implicit biases about the housekeepers. The learners will be asked to consider how the remarkable individuals in the film differ from their conscious and unconscious stereotypes and beliefs about the housekeepers: 2. Empathy. The stories in the film will show remarkable examples of housekeepers reaching out to help patients and their families in ways that are not required of them. What can we learn from the housekeepers about this fundamental human value? 3. Teamwork. What does it mean for housekeepers to be considered members of the healthcare team? Will this change the way we relate to housekeepers? How might their knowledge of the concerns of patients and their families enable us to provide more patient-centered care?

Methods:

The first step in the development of the project is the production of a 20 minute documentary video. This video will allow five housekeepers to each tell a story about their relationship with a patient, and these stories will be interspersed with footage of their work. We will choose stories that illustrate the deep human relationships between housekeepers, patients and their families, their ability to provide encouragement and psychological support, and the ways in which they acquire an important understanding about the issues that are of concern to the patient.

The inaugural showing of the video will occur at Duke University Medical Center for a combined audience of nursing, medical, physical and occupational therapy students, physician assistant students,

and students in respiratory therapy. A similar event, organized by Elizabeth Ross, a member of our team, drew 130 participants to view a documentary about end-of-life, entitled "Being Mortal", followed by interprofessional discussion and sharing of perspectives. The experience was genuinely an integration of multiple professional students and faculty; and participant feedback was rich, insightful and meaningful.

Learners will complete the following two instruments both before and after the showing and discussion of the film: an Implicit Association Test specifically showing images and descriptions of housekeepers, and a written quantitative survey. The quantitative survey will include specific questions on a Likert Scale about the role of housekeepers, and the perceptions of learners about that role. A qualitative survey, administered only after the film, will ask for short answers to the following 3 questions:

- 1. What is your reaction to the film?
- 2. What did you learn about yourself?
- 3. How might what you learned affect your future behavior?

Learners who provide their email addresses will be contacted a month after the film showing and will be asked if the anticipated behavior change has occurred.

A formative evaluation of the teaching session will be undertaken by two means. The extent of change in objective outcomes of interest will be assessed by inferential analyses of pre-post within subjective differences. Qualitative analyses will be used to identify themes in the post-video survey responses and one month follow-up. We are also happy to say that Professor Deborah Engle, who directs survey/evaluation design and statistical analysis and reporting in our Office of Curricular Affairs has expressed enthusiasm for this project and has offered to provide her expert assistance with this aspect of the work.

We are hopeful that the upshot of this event will lead to additional showings at Grand Rounds of the departments in the School of Medicine at Duke and at Grand Rounds and other department-wide educational conferences for nurses, physicians assistants, and other health care professionals.

Our long term aspiration is for national distribution of the documentary video to the Health Humanities Consortium at Stanford University in Spring 2018, at an International Health Humanities Conference in the United Kingdom in Fall 2018 and at the International Conference on Communication in Healthcare in Porto, Portugal, Fall 2018. Our ultimate goal is to publish a study about the educational impact of the film, along with a short teaching guide and a link to the film on the MedEd Portal of the American Association of Medical Colleges.

]IRB status: Plan to submit

Challenges: With seed funding from the Health Humanities Lab and an IRB exemption, we have already held discussions with the leadership of hospital environmental services, conducted and transcribed a focus group and created a 3 minute demonstration video of a housekeeper story. With sufficient funding, we are sure we can accomplish the creation of the video, the organization of an

interprofessional film showing and discussion, and analysis of the resultant data. Beyond that, further showings of the film will depend on the level of interest of schools and departments within our medical center and beyond. Our ability to show the film at future health humanities and health care communication conferences will also require that they be accepted by the organizing committees of those future events. We believe that the uniqueness of this project, and its appeal to the goals of patient centered care and interprofessionalism will be the keys to its success.

Budget Template:

PI Effort		
Consult costs:	\$9350.00	Creation of video (filming, editing, color correction, sound mix)
Equipment:		
Supplies:	250.00	Snacks for students at interprofessional education session.
Computer		
Travel:		
Total Requested:	9600.00	

Works Cited:

- 1. Jors, K., Tietgen, S., Xander, C., Momm, F., & Becker, G. (2016). Tidying rooms and tending hearts: An explorative, mixed-methods study of hospital cleaning staff's experiences with seriously ill and dying patients. European Association for Palliative Care. doi:doi:10.1177/0269216316648071
- 2. Murphy, W., & Ames, M. (1976). Service personnel contribute patient data to health care team. Hospitals, 50(15), 95–96.
- 3. Schulman-Green, D., Harris, D., Xue, Y., Loseth, D., Czaplinski, C., Donavan, C., & McCorkle, R. (2005). Unlicensed Staff Members Experiences With Patients' Pain on an Inpatient Oncology Unit Implications for Redesigning the Care Delivery System. Cancer Nursing, 28(5), 340–347