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Title: Setup and Execution of the Rapid Cycle Deliberate Practice Death Notification Curriculum

Authors and Affiliations:

Patrick G. Hughes¹, Kate E. Hughes², Mary J. Hughes^{3,4}, Lindsay Weaver⁴, Lauren E. Falvo⁴, Anna M. Bona⁴, Dylan Cooper⁴, Cherri Hobgood⁴, Rami A. Ahmed⁴

¹Florida Atlantic University Schmidt College of Medicine, Boca Raton, FL, USA

Corresponding Authors:

Patrick G. Hughes: hughesp3@gmail.com

Email Addresses for All Authors:

hughesk@aemrc.arizona.edu hughesm@msu.edu Iharmonh@iu.edu Ifalvo@iu.edu ambona@iu.edu ddcooper@iu.edu chobgood@iu.edu raaahmed@iu.edu hughesp3@gmail.com

²Department of Emergency Medicine, University of Arizona College of Medicine, Tucson, AZ, USA

³Department of Osteopathic Medical Specialties, College of Osteopathic Medicine, Michigan State University, East Lansing, MI, USA

⁴Indiana University School of Medicine, Indianapolis, IN, USA



Author Questionnaire

- **1. Microscopy**: Does your protocol require the use of a dissecting or stereomicroscope for performing a complex dissection, microinjection technique, or something similar? **No.**
- **2. Software:** Does the part of your protocol being filmed include step-by-step descriptions of software usage? **No.**
- **3. Interview statements:** Considering the COVID-19-imposed mask-wearing and social distancing recommendations, which interview statement filming option is the most appropriate for your group? **Please select one**.
 - Interviewees wear masks until videographer steps away (≥6 ft/2 m) and begins filming, then the interviewee removes the mask for line delivery only. When take is captured, the interviewee puts the mask back on. Statements can be filmed outside if weather permits.
- 4. Filming location: Will the filming need to take place in multiple locations? No.

Current Protocol Length

Number of Steps: 11 Number of Shots: 24



Introduction

1. Introductory Interview Statements

Commented [AG1]: Authors: To comply with current journal guidelines, we have to limit the introduction to a maximum of 3 statements.

REQUIRED:

- 1.1. **Lauren E. Falvo:** Our protocol describes how to apply the Rapid Cycle Deliberate Practice debriefing technique to the GRIEV_ING death notification curriculum to more effectively train learners in the delivery of bad news.
 - 1.1.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera.
- 1.2. **Anna M. Bona:** This method allows educators to pause a scenario, provide directed feedback, and then let learners continue the simulation scenario the "right way."
 - 1.2.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera.

OPTIONAL:

- 1.3. Rami A. Ahmed: Unskilled death notification can lead to the development of pathologic grief and posttraumatic stress disorder. This method can be applied to train any healthcare provider to deliver bad news.
 - 1.3.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera.



Protocol

- 2. Rapid Cycle Deliberate Practice GRIEV ING Simulation Exercise Preparation and Pre-brief
 - 2.1. One week prior to the scheduled simulation session, email the GRIEV_ING (pronounce 'grieving') pocket card to all faculty [1]. Also email the death notification simulation scenarios, including patient role and background history, to the standardized patients [2].
 - 2.1.1. WIDE: Establishing shot of talent at the computer sending emails. *Video Editor:*Show Figure 1 as a split screen or an inset here.
 - 2.1.2. Scrolling down a death notification simulation scenario on screen.
 - 2.2. Before beginning the death notification simulation exercise, prepare the examination rooms by placing a chair for the standardized patient and a stool for the learner in each room [1].
 - 2.2.1. Talent preparing the examination room.
 - 2.3. Print patient scenario information, which includes name, age, gender, background, condition and survivor present [1], then post it outside each exam room for learners [2].
 - 2.3.1. LAB MEDIA: JoVE RCDP Patient Scenario Information door note.docx. *Video Editor: Scroll down as VO speaks.*
 - 2.3.2. Talent posting the scenario information outside of the room.
 - 2.4. Have faculty read the death notification scenarios prior to the start of the session [1]. Gather all faculty and learners in one room and review the simulation session goals and objectives [2].
 - 2.4.1. Faculty reading the scenarios.
 - 2.4.2. All faculty gathered in one room while talent reviews the goals and objectives.
 - 2.5. Form a fiction contract with the learners and pledge to respect them [1]. Divide the learners into groups of no more than 4 to 5 [2] and give each learner a GRIEV_ING pocket card to reference during the simulation [3].
 - 2.5.1. Talent discussing the fiction contract with the learners.
 - 2.5.2. Talent dividing the learners in groups.
 - 2.5.3. Talent passing out GRIEV_ING packets.



3. Rapid Cycle Deliberate Practice GRIEV ING Simulation Exercise

- 3.1. Select one learner from each group to perform the initial death notification scenario [1]. Position the standardized patient in the exam room [2] and have the learners review the simulation scenario case details posted outside the exam room [3].
 - 3.1.1. Talent selecting a learner.
 - 3.1.2. Patient sitting in the exam room.
 - 3.1.3. Learner reviewing the simulation scenario.
- 3.2. Start the initial death notification scenario and run it from start to finish without interruption [1]. Identify specific areas that necessitate feedback [2], then perform a micro-debriefing at the conclusion of the first scenario. Give succinct feedback to learners on initial performance in less than 5 minutes [3]. Videographer: This step is important!
 - 3.2.1. Death notification scenario in progress.
 - 3.2.2. Talent taking notes.
 - 3.2.3. Talent debriefing the learner after scenario conclusion.
- 3.3. Reset the scenario and place the learners outside the room [1]. Perform the same simulation scenario from the beginning, starting with the same learner as the leader for the second round of the scenario [2]. Videographer: This step is important!
 - 3.3.1. Learners outside of the room.
 - 3.3.2. Scenario starting over.
- 3.4. Apply the RCDP technique during the scenario. Pause the scenario, provide directed feedback and then rewind the scenario 30 to 60 seconds [1]. Have the standardized patient restart the scenario [2]. Videographer: This step is difficult and important!
 - 3.4.1. Talent pausing the scenario, giving feedback, then continuing.
 - 3.4.2. Patient restarting the scenario.
- 3.5. Perform a micro-debriefing at the conclusion of the scenario training period, providing constructive feedback to the learners [1]. Repeat the scenario again from the start and continue with the RCDP approach [2]. Videographer: This step is important!
 - 3.5.1. Talent performing a micro-debriefing.
 - 3.5.2. Scenario restarting and talent demonstrating the RCDP approach.
- 3.6. When finished, gather all faculty and learners in one room for a 15-minute group wrap-up [1]. Focus on key take-home points from the training and allow for learner feedback [2].
 - 3.6.1. Faculty and learners walking into a room.



3.6.2. Discussion amongst talent and participants.



Results

4. Results: RCDP Death Notification Curriculum Results

- 4.1. This protocol was implemented on 22 emergency medicine residents. [1] Learners' median self-efficacy and knowledge scores increased from 3 to 4 and 65 to 90, respectively, when comparing pre- and post-simulation results [2]. In addition, pre- and post-intervention death notification performance scores improved [3].
 - 4.1.1. LAB MEDIA: Table 1.
 - 4.1.2. LAB MEDIA: Table 1. Video Editor: Emphasize the self-efficacy and MCQ scores
 - 4.1.3. LAB MEDIA: Table 1. Video Editor: Emphasize the Death Notification Scores row.
- 4.2. Post-curriculum surveys indicated that this exercise was a great experience and provided instant feedback. Residents felt the RCDP Death Notification Curriculum solidified their death notification skills and allowed them the opportunity to refine their technique [1].
 - 4.2.1. LAB MEDIA: Table 1.
- 4.3. Only one resident preferred the tradition simulation method with no interruptions [1].
 - 4.3.1. LAB MEDIA: Table 1.



Conclusion

5. Conclusion Interview Statements

- 5.1. **Anna M. Bona:** When attempting this protocol, remember to wait until the second round of the scenario before applying the Rapid Cycle Deliberate Practice technique.
 - 5.1.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B-roll: 3.4.1.*
- 5.2. **Lauren E. Falvo:** Future directions for this study include investigating how this curriculum translates to the clinical environment.
 - 5.2.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera.