**Abstract**

This end-of-life curriculum focuses on exposing students to hospice and palliative care in a 4-week long family medicine clerkship at Wayne State University. During the rotation each student is required to spend one full day in local hospice/palliative care settings. The goals are to increase student understanding of palliative care principles and hospice care and challenge student emotional reaction to interacting with dying patients. At the clerkship orientation a short introductory lecture is given about palliative care. Each student is assigned to accompany a hospice healthcare professional such as a nurse, physician, social worker or spiritual care provider on their patient visits. The students are asked to interact with dying patients and their families during these visits. Following the patient visits, the students are asked to complete a written assignment documenting their experience. At the end of the rotation, the students all gather for a hospice debriefing session led by a behavioral scientist and a hospice physician from one of the sites. Students present their patient encounters including their reactions to what they observed. These observations often generate common questions/concerns which the faculty leaders respond to. Students and hospice settings all report very positive feedback about this learning experience.

1. Title of Curriculum: Hospice Site Visit Experience
2. Contact Information:

Name: Juliann Binienda, PhD

Institution: Wayne State University School of Medicine

Email: [jbinien@med.wayne.edu](mailto:jbinien@med.wayne.edu)

1. Has curriculum been submitted elsewhere:

Yes

1. Structure of clerkship in which curriculum has been used:

Wayne State University School of Medicine utilizes a clinical campus model for Year 3 with students entering a lottery to select one of eight metropolitan Detroit hospital systems for clinical training. Each student then spends his or her required rotations in that same hospital system unless the system does not offer the specialty; in the two healthcare systems that do not offer family medicine, the students are placed with private community preceptors.

The hospice sit visit experience is conducted in Year 3 during a required 4-week family medicine ambulatory clerkship. With a class size of 315 students, there is an average of 26 students per month involved in the program. Each session, all family medicine students come together for a rotation orientation, a pre-hospice site visit presentation and a debriefing session after the hospice site visit experience. Weekly required didactics occur at three of the residency teaching sites which rotate monthly among the hospital systems; students are divided up into each didactic session based on the geographical location of their clerkship sites.

1. The Learner Outcomes

Listing of student objectives in STFM Family Medicine Curriculum that curriculum was designed to achieve:

• Demonstrate caring and respect when interacting with patients and their families, even when confronted with atypical or emotionally charged behaviors.

• Demonstrate interpersonal and communication skills that result in effective information exchange between patients of all ages and professionals from other disciplines and other specialties.

• Discuss the roles of multiple members of a health care team (including pharmacists, nurses, social workers, and allied health professionals).

• Demonstrate validation of the patient’s feelings by naming emotions and expressing empathy.

• Effectively incorporate psychological issues into patient discussions and care planning.

1. Program Content and Instructional Strategies

During the clerkship orientation session, the students are given the parameters of the hospice site visit experience along with an introductory lecture about the contrast between palliative and curative care principles including hospice. Additionally, students view and discuss a 10-minute video clip from the Education in Palliative and End of Life Care (EPEC) video series, including an interview with Dame Cicely Saunders as she discusses the history of the modern hospice movement and the importance of training medical students about hospice/palliative care.

Hospice programs work with the clerkship coordinator in determining which days during the month are best for student visits; when determined, each student is assigned to spend one full day with a local non-profit hospice program. During the visit, students are to accompany a member of the hospice healthcare team (who could be a nurse, a physician, a spiritual care provider or a social worker) on his or her patient rounds, which may be in the patient’s home, a hospice facility, a nursing home or a hospital. Students also participate in the hospice program’s interdisciplinary team meetings as an added means in understanding the interdisciplinary care of the patient; furthermore, students are required to complete an assignment in order to ascertain their understanding of interdisciplinary care of dying patients.

At the end of the rotation, students gather for a required debriefing session about their experiences; a behavioral science faculty member and a hospice physician from one of the participating hospice programs volunteer on a rotating schedule to attend these 2-hour debriefing sessions. The structure of the gathering features each student presenting on one of his or her hospice patient encounters, offering demographics, illness trajectory and emotional reactions to the encounters. Questions about medications, hospice billing, prognosis, family dynamics, and spiritual dimensions of care are commonly raised and answered by the attending faculty. Students in Year 4 have a week-long series of lectures about palliative care in the requisite 4-week ambulatory medicine rotation, with topics covering dyspnea, pain management, and withholding treatment, among other things. Many of the same hospice physicians provide presentations for that seminar series.

When students fail to attend their hospice site visits, attempts are made to reschedule or the student has to complete a written assignment based on an end-of-life journal article. There is also a debriefing assignment for those who fail to attend the debriefing.

1. Assessment of Learner Outcomes

Prior to the site visit, students typically report minimal to no contact with dying patients in hospice settings and admit to feeling very fearful and hesitant about the prospect; however, they also overwhelmingly indicate they believe the visit will be a beneficial learning experience.

After the experience, students report on their understanding of interdisciplinary care through the assignment and debriefing discussions. During the debriefings, which are held in a non-judgmental atmosphere to allow for full self-awareness and reflection, the students are directly asked about their emotional responses to what they’ve observed. Following the site visit, the vast majority of students report that the experience was positive, and allows them to be better equipped to discuss hospice care with patients in the future.

During the Year 4 palliative care series, the students are asked to report on what they’ve observed in their training with respect to end-of-life care. Here, many students recall how their Year 3 hospice site visit experience increased their knowledge and improved their attitudes about hospice care.

1. Lessons Learned

• Hospice programs are extremely supportive and very willing to educate medical students.

• Hospice physicians are willing to facilitate the debriefing sessions.

• Both the patients and the families have responded favorably to having a student be present, often at the

moment of death.

• Given that our clerkship is only 4-weeks in length, this one-day experience is crucial in helping students to understand hospice, fear dying patients less and become more capable in expressing emotions in front of their peers, all while broadening their understanding of the family medicine specialty.

• Two new family medicine Year 4 hospice electives have been developed as a result of the success of this program, with several students each year opting for additional experiences in hospice environments.

* Outcomes from this curriculum have been presented at two national conferences and in two published

abstracts which are listed below:

* + Binienda, J. Gaspar, D., Schwartz, K. Receptivity of Medical Students to an Educational Program in End-of-Life Care. J. of Cancer Education 15S: 33, 2000.
  + Binienda, J., Schwartz, K., Gaspar, D. Training in End-of-Life Care through Interaction with Dying Patients: A Curricular Approach for Junior Medical Students. Academic Medicine, May, 2001.
  + Gaspar, D., Binienda, J., Schwartz, K., & Finn, J. (February 2001). From Conceptualization to Realization: Developing and Implementing a Curricular Theme on End-of-Life Care for Medical Students. Presented at the Society of Teachers in Family Medicine 27th Annual Predoctoral Education Conference, Long Beach, California.
  + Binienda, J. & Schwartz, K. (February, 2004). Interacting with Hospice Patients: Effects on Empathy and Attitude of Third-year Medical Students. Presented at the Society of Teachers in Family Medicine 30th Annual Predoctoral Education Conference, New Orleans, Louisiana.

1. Guide to Appendices

A. Education in Palliative and End of Life Care (EPEC) Video teaching series- http://www.epec.net/

A video clip of Dame Cicely Saunders, the founder of the modern hospice movement, is shown during the clerkship orientation regarding hospice care. In this clip she speaks directly to medical students.

B. Hospice site visit assignment

This is part of the clerkship syllabus of assignments that students are to complete following their hospice site visit experience. It is turned it at the hospice debriefing session.

C. Makeup hospice site visit assignment

If a student fails to attend their scheduled hospice site visit day, they are required to complete this written assignment and turn in with other clerkship assignments.

D. Hospice debriefing session goals

This provides a brief overview of the hospice debriefing session. It is useful for the hospice physician faculty who preside at the debriefings with the students.

E. Makeup hospice debriefing assignment

If a student fails to attend the debriefing session, they are required to complete this assignment and turn in with other clerkship assignments.