

UC Irvine School of Medicine

Human Kindness Curriculum: Outline and Objectives

2018-2019

(MS 1 and MS 2)

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COURSE OVERVIEW

The Human Kindness Curriculum, a component of the Clinical Foundations sequence, was initiated in 2015. This curriculum provides students with *both an understanding as well as the tools essential to the practice of empathy, compassion, and kindness* that are vital to becoming a truly outstanding physician. The course provides materials enabling students to actively consider the role of kindness in the clinical realm. The course contents also demonstrate to students the different facets of kindness through a variety of interdisciplinary perspectives and interactions. The Human Kindness curriculum sessions are both informative and interactive with the express purpose of encouraging insights into the importance of introducing human kindness into the healing process.

GLOBAL OBJECTIVES FOR THE HUMAN KINDNESS CURRICULUM

YEAR 1

Students will be able to:

1. Verbalize the importance of kindness and related constructs of empathy and compassion in the context of clinical care.
2. Articulate why presence is an essential foundation for cultivating kind, empathic clinical behavior
3. Demonstrate specific performative and centering techniques that encourage the expression of kindness to others

YEAR 2

Students will be able to:

1. Analyze how challenging clinical situations, due to conveying adverse clinical news or dealing with a disruptive ill person, are addressed and resolved in actual clinical encounters
2. Indicate how end of life issues affect patients, families, and physicians and develop the skills to effectively address the concerns the family and the affected individual
3. Identify and demonstrate specific interactional approaches relevant to difficult patient encounters
4. Identify and demonstrate specific communicative skills relevant to delivering bad news
5. Identify and demonstrate specific communicative skills relevant to interacting with terminally ill patients.

SPECIFIC SESSIONS AND LEARNING OBJECTIVES (YEAR 1)

*Session 1: Overview of Human Kindness

1. Administer Jefferson Scale for Physician Empathy: 1st evaluation
2. Experiential exercises
 - a. Empathy exercise – dyads
 - b. *Think-Pair-Share* exercise (Julie Youm)
3. Kindness in clinical practice: Ralph Clayman
4. Patient presentation: Martha Sosa-Johnson – cancer survivor

Objectives:

- Differentiate among sympathy, compassion, empathy, and kindness
- Describe what clinical kindness looks like in the doctor-patient interaction and state what benefits it brings to the encounter
- Identify the value of empathy from the patient perspective .

*Session 2: “Being Present”: Eli Simon (Professor of Drama, UCI)

(N.B.: This session needs to be held in the 3rd floor colloquium room in order to have sufficient space for the interactive student sessions.)

(Introduction by Dr. Shapiro regarding how this session provides tools for effective and empathetic interviewing of a patient.)

1. Teaching theater improvisational skills as relevant to clinical medicine and interview skills, specifically as a way to develop “presence”
2. Emphasis on nonverbal behavior and enhancing interpersonal connections
3. Building teamwork

Objectives:

- Apply improvisational acting skills to mitigate stressful circumstances
- Express a clear consciousness of others as applied to understanding a patient’s emotional state

- Create an acute sense of self-awareness thereby freeing the individual to focus on the patient interview
- Integrate listening skills into daily clinical encounters
- Strengthen one’s ability to receive and respond appropriately to emotional cues (e.g. facial expression and body language)

*Session 3: Mindfulness as the Foundation of Kindness and Empathy – Dr. Nicole Wakim, Samueli Center

1. Mindfulness and formal meditation as a way cultivating presence in the present moment
2. Mindfulness and formal meditation as techniques for practicing self-care and other-care
3. Loving-kindness meditation as a technique for enhancing kindness toward self and others

Objectives:

- Define the concept of presence and how mindfulness practices build presence
- Employ the concept of “self-kindness” in order to provide patient empathy.
- Demonstrate breathing exercises necessary for creating a kindness meditation in order to relieve personal stress anxiety.
- Use of meditation (i.e. loving kindness) to improve one’s kindness to self and others
- Teaching a meditation technique (i.e. loving kindness) to patients to improve their own mental health

*Session 4: The Clinical Practice of Human Kindness: Dr. Cindy Haq

1. Presentation of Patient-Centered Model of Care
2. Physician demonstration (Dr. Haq) with Standardized Patient – case involves social determinants of disease, social justice issue (undocumented individual with asthma)
3. Student observations (with rating chart) and paired discussion of interview

Objectives:

- Explain elements of the patient-centered model of care
- Describe how particular demonstrations of empathy/kindness/concern in demonstration were related to patient satisfaction and trust ; and how empathy/kindness/compassion led to better understanding of the patient
- Use the Appreciative Inquiry process to identify examples of kindness/empathy in PACE or other physician role-models

SPECIFIC SESSIONS AND LEARNING OBJECTIVES (YEAR 2)

(During year 2 of the Human Kindness curriculum the students will take the Jefferson Scale for Physician Empathy at the beginning and end of the curriculum.)

*Session 1: Difficult Encounters and Human Kindness: Interacting with the Emotionally Challenging Patient

1. Managing a difficult encounter with a patient who has a chronic disease: Aaron Kheriaty and a psychiatric patient
2. Difficult encounters
 - a. Physician panel – 3 physicians from different specialties tell stories of a difficult encounter
 - b. Physician demonstrations – 1) Dr. Hann and patient with distrust of medical system 2) Dr. Tan Nguyen and Spanish-speaking patient and son with missed diagnosis

Objectives:

- Explain the underlying locus and causes of difficult interactions in medical encounters.
- Identify factors that help to avoid emotional escalation in difficult encounters.
- Identify and implement behaviors that manage difficult encounters and avoid emotional escalation.

*Session 2: Breaking Bad News and Human Kindness

1. Physician panel presents different models (e.g., SPIKES) for delivering bad news
2. Small group physician-facilitated role-plays of a bad news scenario

Objectives:

- Explain the importance of empathy when delivering bad news.
- Identify the process of successfully delivering bad news, including description of specific elements and stages
- Recognize different emotional responses in patients receiving bad news.
- Identify and manage emotional responses involved in delivering and receiving bad news.
- Demonstrate empathic behaviors to improve patient relationships in these high-stress situations.

*Session 3: Death and Dying and Human Kindness

1. Physician demonstration: Aaron Kheriaty and terminally ill patient
2. Small group physician-facilitated role-plays of talking with a terminally ill patient (clarifying misunderstandings, facing end of life, meeting needs of family)

Objectives:

- Reflect on a personal experience with loss
- Describe different ways a terminal diagnosis affects patients and family members, and their relationships with physicians
- Articulate key points in a medical student's role in interacting with a terminally ill patient and/or their family (what to disclose, what an attending should disclose, how to be honest yet compassionate)

*Session 4: Practicing Compassionate Interview Skills During Difficult Encounters: Julie Youm

(2 hour session rather than 1.5 hrs.)

1. Students work in groups of 6 with 1 student interviewer and 5 student observers (evaluators equipped with the CARE evaluation tool)**
2. 16 standardized patients each wearing Google Glass
3. The student group rotates to another room every 20 minutes and another student does the interviewing as the 5 students do the evaluation. The 20 minute stations will include the following activities:
 - 10-minute encounter with standardized patient addressing one of the following:
Difficult Encounter (chronic pain patient seeking opioid prescription)
Breaking Bad News
Dying Patient/Family Member
 - 5 minute peer evaluation period and review of the individual student's Google Glass video
 - 5 minute discussion as a group with commentary by the standardized patient
4. There are 6 rounds each of 20 minutes so everyone in the group gets to do an interview and be evaluated by the CARE system thereby servicing 96 students.
5. A large-group debrief to enable students to synthesize this experience

Objectives:

- Analyze the importance of narrative and interviewing style in the work of healing.
- Acquire a better understanding of how one is perceived by patient and peers during an interview exercise.
- Utilize skills obtained in Sessions 1-3, for more effective and meaningful patient interviewing.
- Apply specific skills in eliciting and respecting patients' description of their illness.