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Title

The Importance of Adequate Training and Preparation Prior to Clinical Experiences to Reduce Harm

Priority 1 (Research Category)

Education and training

Presenters

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Abstract

Context: Although early clinical experiences are important for training rising medical professionals, many of these opportunities involve vulnerable patient populations. Additional education is necessary for student volunteers to employ culturally sensitive and effective communication when interfacing with these marginalized communities. It remains to be unassessed how much training is required to improve student clinical skills. Competency in motivational interviewing, barriers to healthcare, trauma informed care, and interprofessional development in a clinical environment are all key skills that were assessed in this study.

Objectives: Upon completion of the presentations, students should report increased knowledge of how to implement presentation topics and increased comfortability in interacting with the target patient population within an interprofessional team.

Study Design: Longitudinal Study

Setting: Rising healthcare professionals volunteered to participate in a clinical-based pilot program serving homeless individuals at a local church.

Population Studied: 32 rising healthcare professionals from various occupations at the University of Texas Medical Branch were recruited by Street Medicine Interest Group and community engagement faculty to serve the patient population.

Intervention: Students completed surveys before and after completing various training sessions to gauge their ability in using motivational interviewing skills, understanding their interprofessional role, discussing sensitive topics, and supporting vulnerable patients.

Main Outcome Measures: Competency of various clinical skills and interprofessional capabilities.

Results: Participating students showed improved competency in understanding their interprofessional role, despite not receiving any formal training on this topic. Similarly, students showed improved ability

in identifying which “stage of change” patients were in regarding their lifestyle goals, as well as self-confidence in working with the homeless population after brief, introductory presentations.

Conclusion: The preliminary results raised important medical humanities questions, such as the relationship between student perceived preparedness and healthcare quality as well as the amount, type, and delivery method of necessary training when treating vulnerable populations. These ethical dilemmas must be addressed in order to enhance primary care curriculum in higher education to improve family medicine outcomes.