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EARLY INTRODUCTION OF TRAUMA-INFORMED CARE IN A MEDICAL SCHOOL CURRICULUM

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Introduction/Background

- Trauma is pervasive across all backgrounds with about 1 in 6 adults experiencing four or more Adverse Childhood Experience in their lifetime.¹
- Trauma-informed care (TIC) is a strengths-based care delivery approach focused on recovery and healing through safe, collaborative relationships between patients and healthcare providers.²
- TIC builds upon the RESPECT model taught to first year medical students in their Doctoring courses. The RESPECT model is an action-oriented set of communication and relational behaviors designed to build trust across differences of race/ethnicity, culture, and power.³
- The UNM medical school curriculum has not included focused TIC for Phase I students.
- Medical students should develop communication and physical exam skills early in their education to identify and more effectively respond to patients who have experienced trauma.
- Implementing universal TIC improves patient satisfaction, patient engagement, and health outcomes.

Methods/Study Design

We designed a pilot case-based session for second-year medical students. Curriculum consisted of three parts: a narrated PowerPoint overview of TIC, two cases, and one short-answer Doctoring exam question. Cases described two different patient scenarios with questions assessing the definition of TIC, the importance of using this approach, and describing how TIC can be implemented into a patient encounter.

The objectives for the session were the following:

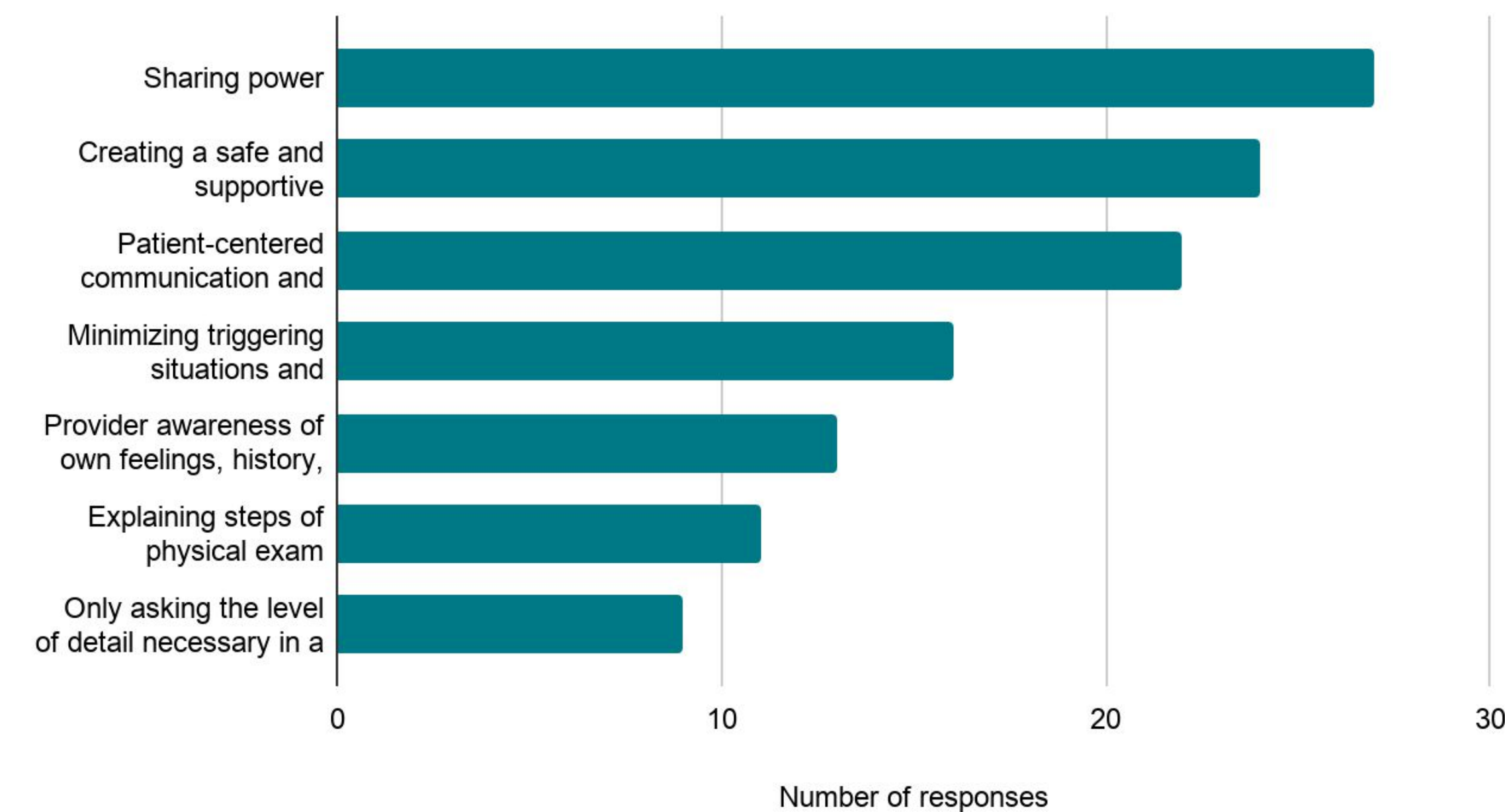
By the end of the activity, learners will be able to:

1. **Define trauma-informed care**
2. **Explain the importance of using a trauma-informed framework in the clinical setting**
3. **Apply the principle of trauma-informed care to case-based scenarios**

To determine if these goals were met, we performed a thematic analysis of the results of students' Doctoring exam. Each researcher did an independent review of questions before meeting to determine a final set of themes consistently seen in student responses.

Results/Findings and Analysis

Themes related to TIC identified in Doctoring Exam responses



Conclusions

- When tested on this topic, students indicated that this session helped them to understand:
 - Parallels between the RESPECT model and TIC, specifically aspects of patient-centered care, demonstrating empathy, and sharing power.
 - How trauma can impact a patient's health outcomes, and how TIC builds upon their foundational skills
- Students additionally learned how to:
 - Improve their patient-centered skills specifically during a physical exam. Many students learned how to explain the steps and purpose of a physical exam using a TIC approach and how to empower a patient during a physical exam.
 - Elicit and affirm patient histories, without asking unnecessary level of details about trauma.
 - Assess their own history and emotions during a patient encounter.

Current Progress and Future Directions

- Incorporate skilled training in the 4 Cs of TIC, specifically teaching students how to implement breathing techniques as an aspect of Calm. This activity will help teach students how to implement self-care and create a safe, supportive environment for patients. Students will also practice their TIC based communication skills with standardized patients.
- Integrate TIC curriculum into the Phase II Internal Medicine Clerkship to build skills in the inpatient setting. Hospitalization can be a traumatic experience on its own but with increased isolation and uncertainty during the COVID-19 pandemic, we suspect the mental health impacts to be far greater.
- Formalize the evaluation process with pre-session and post-session surveys to improve the TIC curriculum.

Acknowledgements and References

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