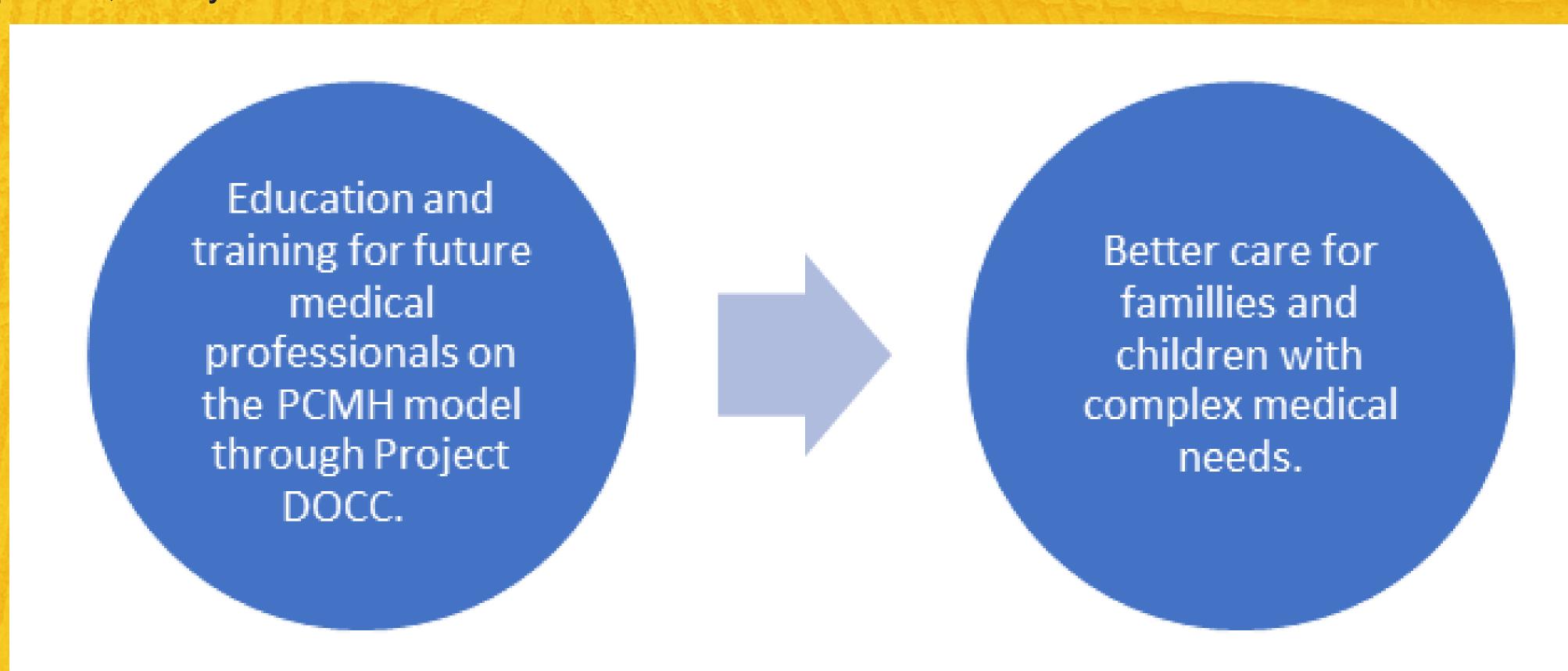
Analysis of Learner Questions Posed During Project DOCC Simulation Experiences

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Background

- 1. More infants are surviving prematurity and complex medical diagnoses and require complex care as they continue to grow and develop.
- 2. Parents of children with special healthcare needs often become stressed and confused by daily demands of coordinating care between specialists, therapies and their community with no real sense of someone "driving the bus".
- 3. The goal of Project Delivery Of Chronic Care (DOCC) is to introduce future medical professionals to the Patient Centered Medical Home (PCMH) model which emphasizes the relationships among the patient, family and medical team.

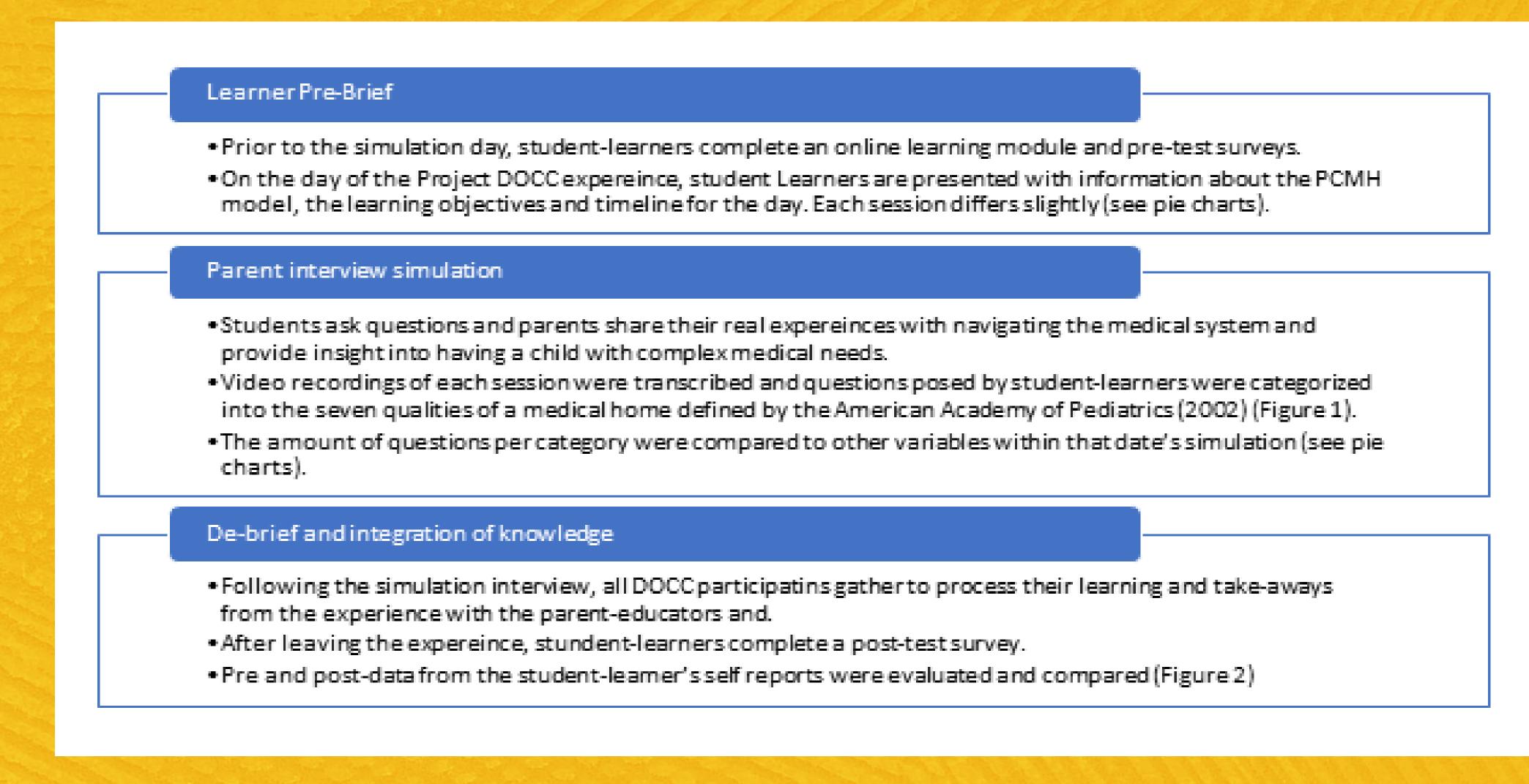


In 1994 three mothers of children with complex medical needs created a national curriculum titled Project DOCC (Delivery of Chronic Care). This simulation experience, which is the focus of our study, emerged as an adaptation from that national curriculum, which uses parents as teachers. This national curriculum can be used as the basis for starting Project DOCC in one's area.

Objectives

Project DOCC is an effective, engaging and unique way to educate students on the PCMH model and complex pediatric care through the real experiences from the parents of children with complex medical needs acting as educators.

Methods

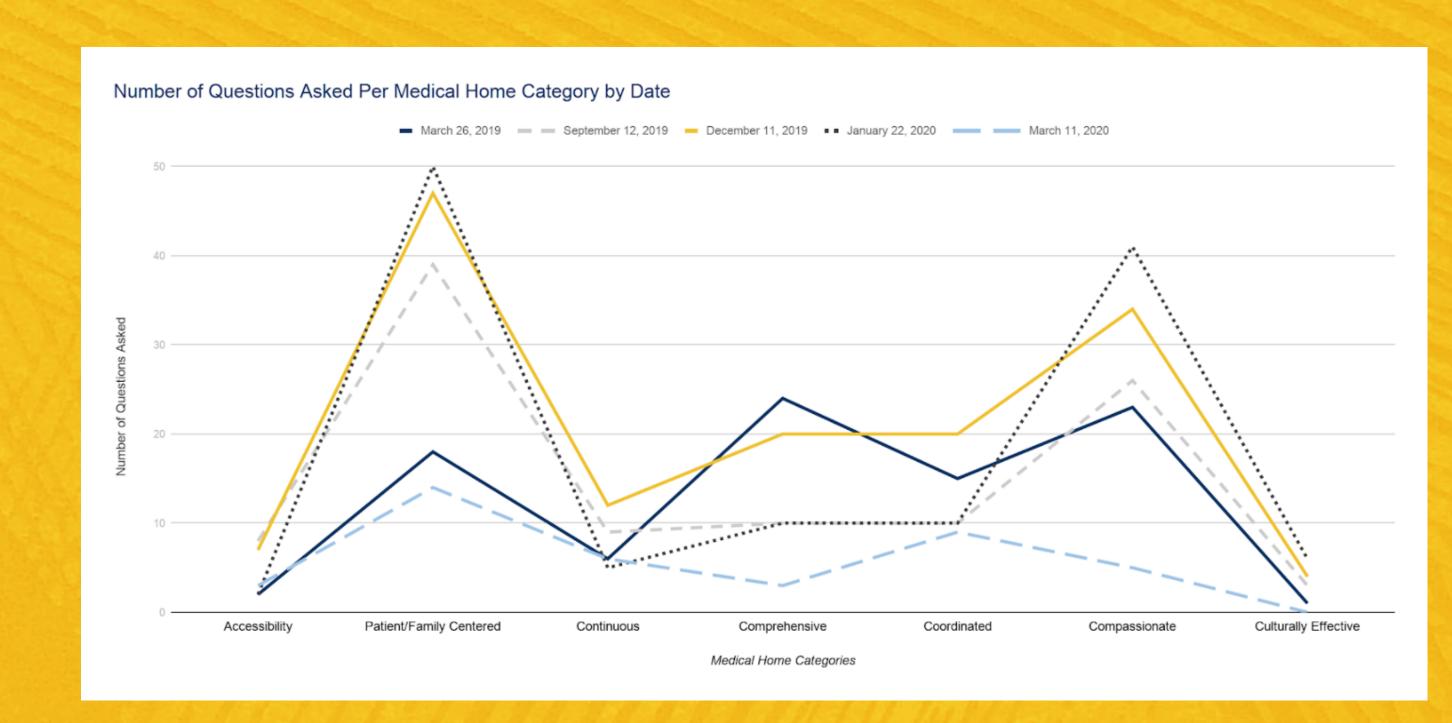


Outcome Mean (SD) Pre-Simulation Post-Simulation	ACCEPTATION OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AN	BOSCOTTON CO. S. C.	AND A VINCE AND A PROPERTY OF
Role of profession in continuous care element Role of profession in patient, family-centered element Role of profession in coordinated care element Role of profession in 2.41 (1.5) 4.39 (0.7) coordinated care element Role of profession in 2.22 (1.4) 3.98 (1.1) accessible services element Role of profession in culturally effective element Importance of Primary Care 4.29 (1.1) 4.61 (0.8)	Outcome	Pre-Simula-	Post-Simula-
continuous care element Role of profession in patient, family-centered element Role of profession in coordinated care element Role of profession in accessible services element Role of profession in culturally effective element Importance of Primary Care 2.34 (1.4) 4.49 (0.6) 4.49 (0.6) 4.39 (0.7) 4.39 (0.7) 4.39 (1.1) 4.15 (1.0)	Familiarity with PCMH	1.68 (1.2)	4.22 (1.0)
family-centered element Role of profession in coordinated care element Role of profession in accessible services element Role of profession in culturally effective element Importance of Primary Care 2.41 (1.5) 4.39 (0.7) 4.39 (0.7)	•	2.17 (1.4)	4.32 (0.8)
coordinated care element Role of profession in accessible services element Role of profession in culturally effective element Importance of Primary Care 2.22 (1.4) 3.98 (1.1) 4.15 (1.0) 4.15 (1.0) 4.15 (1.0) 4.15 (1.0)	•	2.34 (1.4)	4.49 (0.6)
Role of profession in culturally effective element Importance of Primary Care 2.63 (1.4) 4.15 (1.0) 4.61 (0.8)	•	2.41 (1.5)	4.39 (0.7)
effective element Importance of Primary Care 4.29 (1.1) 4.61 (0.8)	•	2.22 (1.4)	3.98 (1.1)
	•	2.63 (1.4)	4.15 (1.0)
	Importance of Primary Care Provider in PCMH	4.29 (1.1)	4.61 (0.8)

Table

Figure 1

- 1. The five sessions were transcribed by the authors.
- 2. Learner questions were categorized into one of the seven medical home categories (Figure 1).
- 3. Factors within the individual simulations, and the results of the categorization of questions posed were compared to determine any correlations (pie charts).
- 4. Pre and post-data self -reports from the student learners were reviewed to determine their experience with Project DOCC (Table 1).
- 5. Recommendations were made for the improvement of future simulation experiences based on the conclusions drawn from the data.

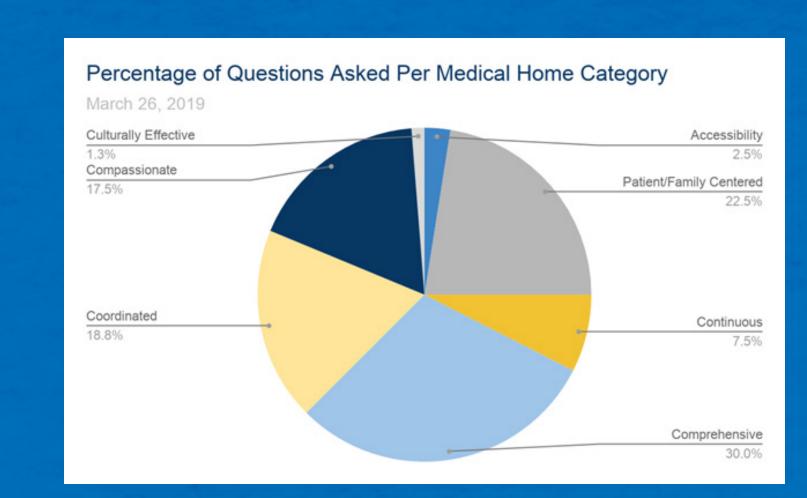


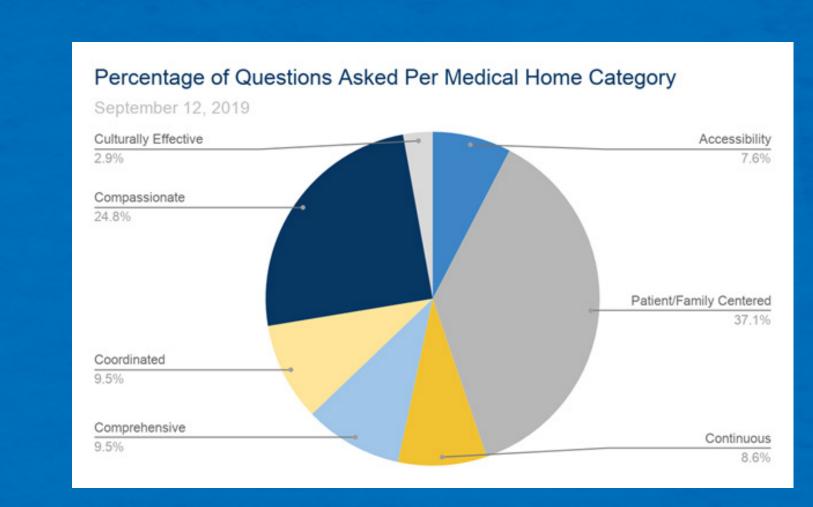
*limitations observed were related to students being given less time with parents, asked to question multiple parents, or medical residents not being present, therefore, reducing the quantity and quality of questions

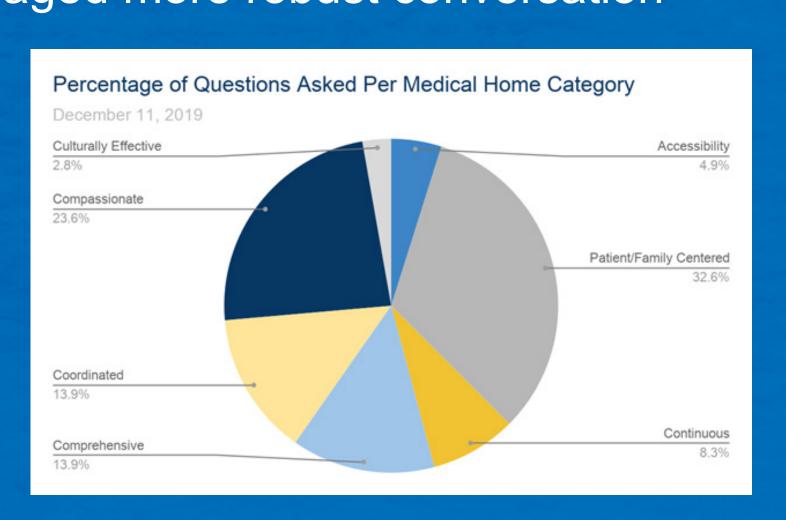
*We determined Dec. 11, 2019 as our most successful simulation due to questions asked and range of categorical data encouraged by the presence of a medical resident and the team building exercise

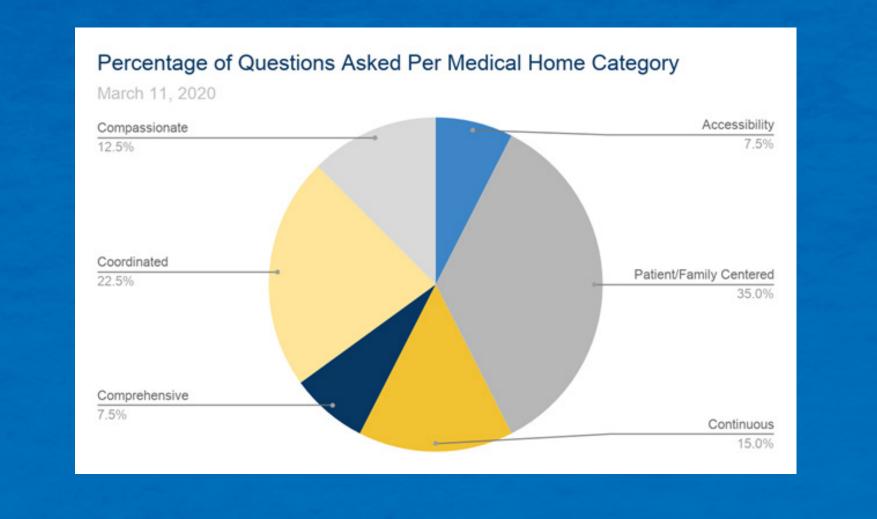
Findings/Results

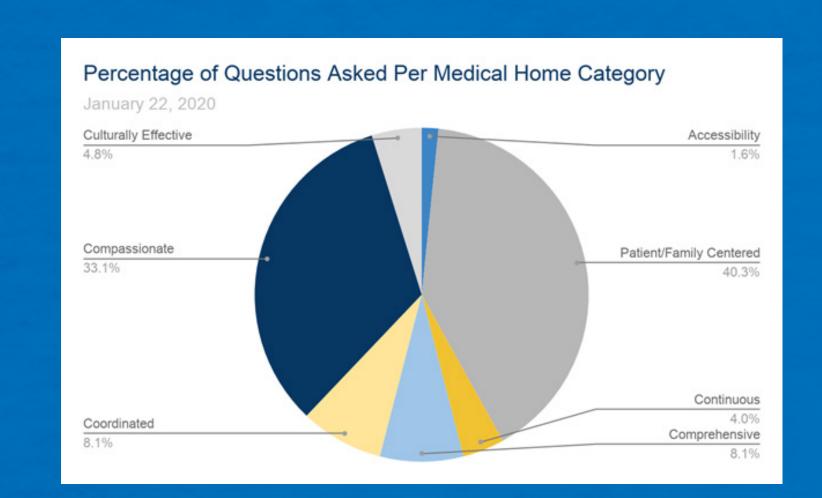
- Table 1 indicates that learners left the simulation with a greater understanding of a PCMH
- The implementation of the team building exercise yielded a more cohesive team dynamic and a greater depth
 to questions asked as evidenced by a 40 question increase and pronounced diversity of categories covered
- Categories associated with Patient/Family Centered and Compassionate questions were consistently higher across all simulations
- A 40-minute session with one parent yielded greater results than a 20-minutes session split between 2 parents
- Medical Residents often took a leader role within the care team and encouraged more robust conversation











Conclusions

- Team building exercise established a dynamic and created rapport between team members that proved to be effective in increasing the quality of questions
- The amount time spent with parents was crucial because each parent had a complex story to share and when students were allowed
 more time with parents they had the opportunity to increase their conversational depth
- Medical Residents consistently took the leader role of their teams

References

American Academy of Pediatrics. (2002). The Medical Home. Pediatrics 2002: 110 (1), 184-186.

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