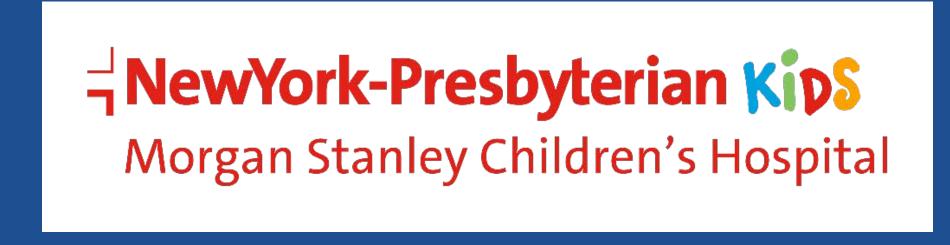


Innovative Module Redesign Training the Future Front Line: Teaching Medical & Psychology Learners Morgan Sta Teamwork to Promote Multidisciplinary Collaboration Dara Steinberg, 1,2 Megan Askew, 1 Jason Guzman, 3 Alexandra Antosy, 1 & Nobuko Hijiya 1





¹Department of Pediatrics, Division of Hematology, Oncology & SCT, CUMC; ²Department of Psychiatry, Division of Child & Adolescent Psychiatry, CUMC ³Center for Teaching and Learning, Columbia University

INTRODUCTION

- Rising rate of psychiatric conditions in children has led to an increased focus on the importance of mental health in medical education¹⁻³
- Surgeon General recently issued an advisory stating "Mental health challenges in children, adolescents, and young adults are real and widespread. Even before the pandemic, an alarming number of young people struggled with feelings of helplessness, depression, and thoughts of suicide and rates have increased over the past decade." ⁴
- Pediatric providers do not feel that they have sufficient education nor competence to adequately handle their patients' mental health concerns^{1,2}
- Pediatric consultation liaison (CL) psychology developed in the 1970s out of a growing need for psychology services in medical settings to address psychological factors that could be affecting medical condition/functioning⁵⁻⁷
- Collaboration is a key component of CL psychology⁸
- In hospitals, pediatric patients are often cared for by multidisciplinary teams, that may include medical and psychology students. Research has shown that effective medical teams greatly improve care and reduce error, improving quality, safety, and the patients' overall experience1⁹⁻¹⁰
- At the time of this project there was only 2 pediatric psychologists embedded in medical teams (known to the authors) at CUIMC

OBJECTIVE

- Create and implement a module to teach psychology and medical learners to collaborate effectively
- Increase awareness of mental health needs of children with medical conditions
- Foster awareness that will translate to future rotations and settings

POST-MODULE RESULTS

Confidence 1 (not at all)-5 (extremely)	M ± SD
Collaborate with psychology clinicians in an inpatient medical setting	4.27 <u>+</u> 0.62
Provide feedback to psychology clinicians about the emotional or behavioral needs of a child newly diagnosed with cancer	3.64 <u>+</u> . 0.77
Assess the emotional and/or behavioral needs of a child newly diagnosed with cancer	3.18 <u>+</u> 0.57
Provide feedback to psychology clinicians about the emotional and/or behavioral needs of a child with cancer	3.45 <u>+</u> 0.66
Assess the emotional and/or behavioral needs of a child with cancer	3.00 <u>+</u> 0.60
Comfort 1 (not at all)-5 (extremely)	M ± SD
Collaborate with psychology clinicians in an inpatient medical setting	4.27 <u>+</u> 0.38
Provide feedback to psychology clinicians about the emotional or behavioral needs of a child newly diagnosed with cancer	3.55 <u>+</u> . 0.66
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Assess the emotional and/or behavioral needs of a child newly diagnosed with cancer	3.18 <u>+</u> 0.57
Provide feedback to psychology clinicians about the emotional and/or behavioral needs of a child with cancer	3.18 ± 0.57 3.55 ± 0.66

"Would love more opportunities during the course of the rotation to speak as a team with the psychology team so we can better learn about our patients' needs from the insights...into their emotional and behavioral needs"

"...other services should have psychology too"

METHODS

- Collaborated with medical colleagues and learning designer to create module to implement as part of inpatient pediatric oncology rotation
- Created curriculum and cultivated resources
- Didactic information at beginning of rotation (learner became teacher)
- Planned and unplanned interactions to foster collaborations
- Ran over 6 months; 11 learners completed surveys

NEXT STEPS

- Concise information on psychology focused on logistics and information most relevant to rotation
- Continued planned and natural interactions between psychology and medical learners
- Focusing on teaching of psychology learners ways to bridge between medical and psychology learning

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