

Preliminary Project Proposal: Goals of Care Physician E-Learning

Project Leader:
Team members:

I. Overall Project Scope

The overall design, development, and implementation of a new soft skills e-learning course for Seattle Cancer Care Alliance providers. The course will consist of 3 modules: one focusing on Early Goals of Care, one for Mid Goals of Care, and one for Late Goals of Care. The project will be designed and developed in-house using Articulate suite and distributed to providers using SCCA's Learning Management System. Release deadline is TBD; likely Q3 or Q4 of 2020.

II. Problem Statement

SCCA hosts in-person workshops to help patient care providers develop skills to interact more effectively with patients facing difficult diagnoses and end of treatment decisions. These workshops generally train 5-20 providers at a time and run about 4 hours in length. The structure of these workshops consists of a brief (~20min) didactic overview of key concepts, followed by breaking off into smaller groups of 5 for role-playing activities. During role-play each group is handed scenarios, 2 group members interact, and 3 group members observe the interactions and provide feedback.

Because of COVID-19 precautions, SCCA has implemented restrictions on large gatherings including classroom trainings. The intention of this training is to either fully replace the in-person training with an asynchronous e-learning course, or to provide an asynchronous e-learning course that will then be followed up with a synchronous (in-person or Zoom conference) training.

III. Technical Issues

The current in-house tools available for development include the Articulate 360 suite and media content library, as well as any free resources and tools available on the web. The delivery platform is a Learning Management System called SumTotal. The e-learning will need to be designed in HTML5 and compatible with the current LMS which needs to be written in SCORM. Articulate will be appropriate for this purpose. The LMS will serve as a platform to auto-assign this course to any learners for which it is a requirement. The LMS can also host the course as searchable content for any learners who may choose to take it as a recommendation but not a requirement. Learner performance data can be captured by the LMS and reported back to stakeholders in the form of automatic reports or upon request.

IV. Target Audience

The target audience for this training is SCCA providers. This training needs to be meaningful and valuable to both new and veteran providers. Further audience analysis would be needed to determine additional audience demographics. Useful demographic information to consider when designing this course will be current level of skills/knowledge on the subject matter, approximate size of user audience, audience age demographics, computer skills/experience, and English proficiency.

V. Goals

To develop provider communication skills to increase both patient & provider satisfaction within the organization.

VI. Learning Objectives

After taking this course, the learner will be able to:

- Recall the key concepts of REMAP and NURSE
- Given a scenario, evaluate possible responses and select a response that is most likely to illicit a positive patient interaction.
- Given a scenario, interpret the appropriate point in a patient's treatment to discuss end of life planning such as advance directives and appointment of a proxy.
- Complete proper documentation and billing paperwork for ACP discussions including a POLST form

VII. Design Approach

Our focus for this training is to mirror the hands-on methods used in the classroom. Since the course intention is to build skills and affect behavior change, the course design will rely heavily on practiced examples while keeping written content to a minimum. The plan is to create an asynchronous self-paced training that will be fun, engaging, and aspire to the effectiveness of the synchronous instructor-led training.

A module could be structured as follows:

- i. Introduce course objectives/increase learner motivation (statistics and infographics can be effective tools)
- ii. Briefly introduce key VitalTalk concepts to the learner: REMAP, NURSE
- iii. Show 1-2 video role-play examples. (These could be pre-made videos from VitalTalk or self-produced)
- iv. Debrief video role-play scenarios
- v. Introduce several interactive role-play scenarios where the learner is in control of the patient interactions
- vi. Wrap-up survey to determine user's feedback and areas of struggle

The in-person course uses VitalTalk methodology and worked examples to teach key concepts. We will incorporate this proven methodology into our e-learning product, and where possible reuse content from VitalTalk.

Our team will be responsible for the overall design of the course. Kristen Cooper will be responsible for the development and implementation phases. Iterative prototypes will be released for evaluation during the development phase before the final product is released to the end user.

If we will be producing any of our own video content for this project, that will need to be discussed with the A/V and Marketing departments and a budget and separate project plan will need to be developed.

Other design ideas to take into consideration:

- Physician's time is very limited. Concision is key.
- We are aware of some scenarios providers commonly struggle with during end of life discussions including patients with young children or patients/family members who become accusatory or hostile. We can tailor our content to focus on these scenarios.

VIII. Context for Implementation

The course will be implemented via the LMS and ongoing technical support will be provided by the SCCA Education Department. Other specifics surrounding implementation are TBD. Questions to consider when discussing implementation going forward include:

What are our time constraints?

What are our budgetary constraints?

Will this be a one-time only training, or will there be annual releases?

Will it be assigned as mandatory or 'recommended'?

IX. Outcomes Assessment

Rather than a traditional assessment, this module will contain a survey at the end of the training that will either serve to prepare the instructors of the synchronous (in-person or Zoom conference) portion of the training, or to collect general feedback for stakeholders and to develop future trainings.

Data on any user responses or interactions within the course will be captured by the LMS and can be reported. Other assessment methods TBD.

X. Program Evaluation

Possible methods for evaluating this program's effectiveness include patient and provider surveys. Other measurables TBD.