



Mapping the Landscape, Journeying Together

Symposium 2016

May 1-2, 2016
Westin O'Hare Airport Hotel, Chicago, IL

“The illiterate of the 21st century will not be those who cannot read and write, but those that cannot learn, unlearn, and relearn.”

- Alvin Toffler

“Human knowledge is never contained in one person. It grows from the relationships we create between each other and the world, and still it is never complete.”

- Paul Kalanithi
from *When Breath Becomes Air*

THE ARNOLD P.
GOLD
FOUNDATION
Research Institute

Mapping the Landscape, Journeying Together

Symposium 2016

May 1-2, Chicago, IL

PLANNING COMMITTEE:

Elizabeth Gauferg, MD, MPH
Brandy King, MLIS
Nicole Vander Laan
Luisa Raleza

Richard Frankel, PhD
Fred Hafferty, PhD
Eric Holmboe, MD, FACP, FRCP
Tina Martimianakis, PhD

GOLD FOUNDATION PARTICIPANTS:

Richard Levin, MD
Arnold P. Gold, MD
Sandra Gold, MS, EdD
Elizabeth Gauferg, MD, MPH
Brandy King, MLIS
Luisa Raleza
Arabella Simpkin, MA, BMBCh, MRCPCH
Perry Dinardo
Ellen Hedstrom
Molly Ward Olmsted
Kara Pothier

President & CEO
Founder & Chair Emeritus, Board of Trustees
Founder & Senior Counselor to the President
Jean and Harvey Picker Director, Research Institute
Head of Information Services, Research Institute
Administrative Coordinator, Research Institute
Research Institute Fellow
Research Institute Intern
Research Institute Intern
Research Institute Intern
Assistant Director of Marketing & Communications

With gratitude to the Russell Berrie Foundation, The Mellam Foundation, and Picker Institute for their support of the Arnold P. Gold Foundation Research Institute.

TABLE OF CONTENTS

Agenda

Sunday, May 1	1
Monday, May 2	4

Workshops	5
------------------------	----------

Abstracts

Literature Review	7
Advocacy & Discovery	18

Symposium Participants	22
-------------------------------------	-----------

Selection of Accomplishments	45
---	-----------

Logic Model	47
--------------------------	-----------

Sunday, May 1

Monday, May 2

Workshops

Abstracts

Participants

Accomplishments

Logic Model

AGENDA

SUNDAY, MAY 1

- 1:00 PM REGISTRATION
- 2:00 PM WELCOME – Research Institute Director Liz Gaufberg
- WORLD CAFÉ – Liz Gaufberg
- 3:00 PM ADVOCACY & DISCOVERY PRESENTATIONS
- 1 – Activate For Inquiry: A Model for Creating and Sustaining a Culture Of Speaking Up
 Presenters: *Sara Kim, PhD; Jennifer A. Best, MD*
- 2 – Advocacy and Training to Improve Patient-Centered Technology (iPaCT) Use in the Digital Age
 Presenter: *Lolita Alkureishi, MD, FAAP*
- 3 – Organ Donation across Cultures: Developing Best Practices
 Presenter: *Helen Riess, MD*
- 4 – Mindfulness Interventions for Family Caregivers of Patients in Home Hospice
 Presenter: *Jennifer Tjia, MD, MSCE*
- 5 – A Qualitative Study of Preferred Institutional Approaches to Control of Work-Home Interference for Physicians
 Presenter: *Colin P. West, MD, PhD*
- 4:00 PM FISHBOWL
 A conversation with Maren Batalden, Rich Frankel, Eric Holmboe and Helen Riess on scaling humanism to meet 21st century healthcare needs
- 5:00PM BREAK
- 5:45 PM LITERATURE REVIEW POSTER SESSION & RECEPTION
- 1 – How Clinician Resilience Influences Patient Outcomes
 Presenter: *Anthony Back, MD*
- 2 – The Changing Face of Humanism: A Review of Longitudinal Studies of Humanism in Undergraduate Medical Education
 Presenter: *Era Buck, PhD*

3 – Professional Identity Formation in Medicine - How Does Humanistic Healthcare Education with a Focus on Patient Centeredness Help to Shape That Identity?

Presenter: *Deborah Danoff, MD, FRCPC, FACP*

4 – How Does Physician Burnout Affect the Quality of Healthcare?: A Systematic Literature Review

Presenters: *Carolyn S. Dewa, MPH, PhD; Lucy Trojanowski, MA*

5 – Components and Efficacy of Compassion Cultivation and Training Programs in Healthcare: A Meta-Narrative Synthesis across Perspectives and Approaches

Presenter: *Monica C. Worline, PhD*

6 – Fostering Humanistic Support for Families of Hospitalized Children: A Scoping Review and Narrative Synthesis

Presenters: *Hanah Bae, MS; Aleesha Shaik*

7 – Cultural Variance in Defining Autonomous Medical Decision-Making: A Systematic Review

Presenter: *Subha Perni, AB*

8 – Domains of Quality in Clinical Ethics Case Consultation: A Systematic Review and Meta-Ethnography

Presenters: *Louis Fitch, BA, MSII; Rebecca Cherry, Mscj; Matthew K. Wynia, MD, MPH*

9 – Evidence Synthesis of Shared Medical Appointment Implementation as a Humanistic Approach to Patient-Centered Experience

Presenters: *Adam S. Hoverman, DO, DTMH; Kim H. Wadsworth*

10 – How Can Qualitative Evidence Synthesis Contribute to Humanistic Healthcare?: A Meta-Study

Presenters: *Martina Kelly, MBCh, MA, CCFP; Timothy Dornan, MD, PhD*

11 – Equalizing Voices: Neutralizing the Power Hierarchy in Healthcare

Presenter: *Sara Kim, PhD*

12 – Humanism and the Premedical Realm(s): A Narrative Overview and Preliminary Analysis

Presenters: *Barret Michalec, PhD; Frederic W. Hafferty, PhD*

13 – Emotion Before Cognition: How Does Clinician Response to Emotion Influence Family and Patient Comprehension and Decision-Making in Conversations About Critical Illness?

Presenters: *Laura Kane Rock, MD; Julia Whelan, MS, AHIP*

14 – Teaching the Humanity of Evidence-Based Medicine: Informed by the Literature, Guided by the Physician, Framed by the Patient

Presenters: *Andrew Vosko, PhD; Kathryn M. Pate, PhD; Brian D. Schwartz, MLIS; Nicole Michaels, PhD*

15 – What Is The Impact of Reflection as a Teaching Tool in Graduate Medical Education? Examining the Evidence

Presenters: *Abigail Ford Winkel, MD; Sandra Yingling, PhD; Joey Nicholson, MLIS, MPH; Aubrie Ann Jones*

7:00 PM DINNER – Welcome from President & CEO Richard Levin

7:45 PM STORIES

MONDAY, MAY 2

- 7:30 AM MINDFULNESS SESSION – Jennifer Tjia (*Banks Room, 45 min, Optional*)
- 8:00 AM BREAKFAST
- 9:00 AM WORKSHOPS (*See descriptions on page 5*)
- 10:15 AM BREAK
- 10:30 AM WORKSHOPS (*See descriptions on page 5*)
- 11:45 PM LUNCH
- 1:00 PM REPORT OUT FROM WORKSHOPS
- 1:30 PM REFLECTIONS & NEXT STEPS – Fred Hafferty & Liz Gaufberg
- 3:00 PM ADJOURNMENT

WORKSHOPS

1 – Storytelling: Led by Christian Cote'

Located in Banks (Lower Level)

The need for scientists to understand how to communicate their work to a mass audience has never been greater. Participants will engage in hands-on exercises using a successful and proven template for storytelling designed to enhance your pitch to editors, funders and granting agencies.

Christian Cote' is an award winning investigative news and documentary producer who works with four major Toronto Hospitals to shape their messaging and storytelling.

2 – Research: Led by Maren Batalden, Richard Frankel & Paul Haidet

Located in Burton (Lower Level)

There is increasing interest in humanism and the metrics by which it is assessed; this includes quantitative, qualitative and mixed methods approaches. After a [very] brief introduction to the major methodological traditions and the types of questions they are most useful in answering, we will break into three small groups to discuss participants' ideas for research and how to determine the next best steps forward.

Maren Batalden, MD, MPH, is the Associate Chief Quality Officer at the Cambridge Health Alliance (CHA). She has support from the Arnold P. Gold Foundation this year to lead a mid-career Innovation Fellowship for clinician leaders that marries improvement science and relationship-centered care using the frame of “co-producing” healthcare service.

Richard Frankel, PhD, is a qualitative health services researcher and has over 225 publications to his name. He has been a senior mentor for more than 25 research fellows.

Paul Haidet, MD, MPH, is the inaugural Director of Medical Education Research at the Penn State College of Medicine. He is published widely on a variety of topics related to teaching, communication, and the humanistic care of patients.

3 – Social Media: Led by Vineet Arora & Brandy King

Located in Michigan Ballroom A

This workshop will provide an overview of how, when, and why academics should consider writing blog posts and using Twitter. There will be time and help available for drafting blog posts and/or setting up a Twitter account and sending your first (or one-thousand-and-first) Tweet.

Vineet Arora, MD, MAPP, is an academic hospitalist with extensive expertise in using technology to improve workplace learning in teaching hospitals. She maintains a medical education blog called Future Docs, has produced educational videos featured on NPR and the New York Times, and has over 23,000 Twitter followers.

Brandy King, MLIS, is a health sciences librarian with seven years of experience managing websites and social media, including that of the Gold Foundation.

4 – Advocacy Writing: Led by Louise Aronson

Located in Wells (Lower Level)

We all want our research to move beyond funding, and even publication, to make a difference in the lives of patients and the medical system. Opinion and story-based articles for newspapers, medical journals, and blogs are among the most effective ways to ensure research reaches wider audiences and has significant, real-world impact. In this workshop, we'll explore the secrets of success in sample articles of each type, then participants will draft article openings and hooks, with volunteers getting feedback on their approach, writing, and the best medium for their message.

Louise Aronson, MD, MFA, has had her writing appear regularly in medical journals and the lay press, including the *New England Journal of Medicine*, the *Lancet*, the *New York Times*, *Washington Post*, and the *San Francisco Chronicle*.

LITERATURE REVIEW ABSTRACTS

1 – How Clinician Resilience Influences Patient Outcomes

Anthony Back, MD; Vicki Jackson, MD; Karen Steinhauer, PhD; Arif Kamal, MD; Andrea Ball, MLS, MSIM

Resilience for clinicians can be defined as an ability to bounce back from stress, and can be seen as the capacity that enables clinicians to deal with the threat of burnout, or recover from burnout. Research is beginning to identify measures that capture resilience for clinicians, and measure components of resilience. However, an important unaddressed question is whether clinician resilience has any influence on patient outcomes. The specific aim of our scoping review is to identify potential mechanisms, process measures, and patient-level outcomes of clinician resilience. Our multidisciplinary group of investigators represents medicine, nursing, health services, anthropology, bioethics, psychology, mindfulness, and neuroscience. A pilot test of an 8-session resilience intervention will be delivered at 3 pilot sites (Seattle, Boston, Durham). We have completed an extensive review of literature that identifies potential outcomes of resilience that would influence quality, and to our surprise it seems clear that clinician well-being has begun to be named as a '4th metric' needed for the future of ensuring quality care. The most glaring weakness of existing research is that there has been little work constructing or testing hypotheses that link clinician burnout or resilience directly to clinician abilities or capacities that would influence patient outcomes. In addition, the complexity of medical care means that clinician abilities are only one influence on patient outcomes in a complex system. The next steps for our team are to interview stakeholders about the possible implications of existing studies, and to begin to think about hypotheses that might influence future study design. We would like to ask the MTL community for suggestions about cross-disciplinary perspectives that would provide further insights into the complex relationship between clinician resilience and patient outcomes.

2 – The Changing Face of Humanism: A Review of Longitudinal Studies of Humanism in Undergraduate Medical Education

Era Buck, PhD; Mark Holden, MD; Karen Szauter, MD

Background: While most assessments of humanism among medical students occur in cross sectional studies, there is evidence that aspects of humanism change over time. An examination of longitudinal studies may provide insight into developmental changes in response to hidden and explicit curricula.

Central Research Question: Based on current literature, is there evidence that components of Humanism (IECARES) in medical students respond to intentional intervention? If so:

- Is that response consistently in a desired direction?
- Do components vary together or independently?
- How long are changes in student attitudes sustained?
- What is the relative impact of specific interventions reported in the literature?

Methods: We are conducting a systematic narrative review, allowing us to examine literature utilizing a variety of assessment strategies. In addition to searching relevant databases, backward and forward citation searching is integral to our search strategy. Our review includes articles published between 2000 and 2015. Inclusion criteria include longitudinal assessment of Humanism (IECARES) in undergraduate medical students.

Preliminary Findings: Preliminary reviews have identified approximately 65 longitudinal studies meeting our inclusion criteria.

Potential Impact: By examining published longitudinal studies, we will consider the relative impact of diverse interventions and provide recommendations for best practices to support the development of humanism among medical students.

Next Steps: We are continuing data extraction from articles and will analyze effect sizes where possible.

Questions for the MTL Community: What would you want to know about this subset of the literature? What insights do you have about analyzing qualitative work?

3 – Professional Identity Formation in Medicine: How does Humanistic Healthcare Education with a Focus on Patient Centeredness Help to Shape that Identity?

Deborah Danoff, MD; Donald Boudreau, MD; Aliko Thomas, PhD, OT; Naz Torabi, MLIS; Yvonne Steinert, PhD

The question guiding this study is “What is the relationship between professional identity formation and a medical education grounded in the patient/person centered approach?” Understanding this relationship can have a direct impact on educational programming to support professional identity formation that aims to assure that physicians will engage in humanistic health care.

A scoping review will be used to explore the research question. This method permits a broad exploration of literature relevant to complex themes. A pilot literature search identified a number of articles with terms common to both patient/person centered care and professional identity formation. However this literature does not provide definite information on whether this commonality is causal, coincidental or a result of parallel development. This will be a central issue to explore in this study.

Initial steps in pursuing this study have included establishing clear definitions for humanism, professional identity and patient centered care and education. Perhaps not surprisingly this has proven to be a challenge. Of particular note, exploring the term humanism in the literature has identified the broad use of this term including but not limited to its overlap with the term “humanities”. In addition, establishing firm criteria for meaningful patient centeredness is an ongoing exercise.

Next steps include confirming terminology for search terms, identifying the studies to be considered, study selection, data charting and collating results.

Questions for the MTL community include their input regarding criteria for meaningful patient centeredness and additional insights regarding the scope of the term “humanism”.

4 – How Does Physician Burnout Affect the Quality of Healthcare?: A Systematic Literature Review

Carolyn S. Dewa, MPH, PhD; Lucy Trojanowski, MA; Desmond Loong; Sarah Bonato, MIS

Background: We seek to answer the question: What are the effects of physician burnout on the quality of patient care? This question is important because it helps to identify salient healthcare system outcomes. In turn, these outcomes can be used to study the effectiveness of physician burnout interventions. Also, healthcare systems are the primary workplaces for physicians. Thus, the answer to our question can be used to make addressing physician burnout a higher workplace priority.

Methods: We used the systematic literature review methodology suggested by Khan (2011) and the PRISMA guidelines to search five databases: (1) Medline Current, (2) Medline in process, (3) PsycINFO, (4) Embase, and (5) Web of Science. The methodology was chosen for its transparency in identifying and evaluating the included studies.

Preliminary Findings: Among 3,255 unique citations, we found 14 relevant papers from North America, Europe, Asia and the Middle East. The studies represent different healthcare systems and structures. Yet, physician burnout seems to be a concern in all systems.

Potential Impact: Our results can provide knowledge about how patients are affected when physicians experience burnout. These results can inform the development of effective interventions designed to address physician burnout.

Next Steps: Synthesize the information and prepare a manuscript.

Questions for the MTL Community: In what ways does humanistic care affect physician burnout?

5 – Components and Efficacy of Compassion Training Programs in Healthcare: A Meta-Narrative Synthesis Across Perspectives

Monica C. Worline, PhD; Emma Seppala Long, PhD; James R. Doty, MD

Compassion as a response to human suffering has long been a focus of humanistic medicine. Yet the ability to practice with compassion is under siege from a host of conditions including time pressure, technological and financial change, skyrocketing stress, and increasing burnout. In the face of these challenges, the field is renewing an emphasis on cultivating compassion. To examine this interest, we adopted a meta-narrative review process that illuminates a variety of compassion training methods deployed in healthcare. Meta-narrative review is particularly suited to this project because of its explicit goal of distinguishing and synthesizing across a variety of perspectives.

We have undertaken an initial “territory mapping” to identify the appropriate scope of the review. Mapping reveals a variety of programs focused on developing compassion, with unique histories, paradigms, and methods. Some are grounded in meditation as a primary intervention while others are not. These programs are contrasted with others that focus on a broad umbrella of

relational skills such as trust, listening, and respect. Evidence of efficacy varies widely. Outcomes of interest include clinical measures, reduced burnout, and increased professional satisfaction.

Francis Peabody offered this beacon for humanistic medicine: “...the secret of the care of the patient is in caring for the patient.” As the field changes, this literature review will provide clarity to instructors and practitioners seeking to refocus on caring and compassion in medicine. We continue to refine distinctions and develop a broad meta-narrative that synthesizes the variety of approaches to compassion training in healthcare.

6 – Fostering Humanistic Support for Families of Hospitalized Children: A Scoping Review and Narrative Synthesis

Stephanie Doupnik, MD; Hanah Bae, MS; Aleesha Shaik, BS; Maylene (Kefeng) Qiu, MA; Meghan Marsac, PhD; Chris Feudtner, MD, PhD, MPH

Background: Parents of hospitalized children may experience psychological distress related to the difficulties of caring for the child while balancing other life responsibilities. Interventions for family members of hospitalized children may have a positive effect on the child’s hospital outcomes. We conducted a scoping review of the literature to evaluate the evidence base for interventions that provide humanistic support for parents of children in inpatient hospital settings.

Methods: We organized our search strategy around the PRISMA statement and IOM standards, as directed by an experienced research librarian. We searched the relevant online databases using key concepts: “hospitalization,” “pediatric,” “parents,” and “coping support intervention.” We reviewed titles and abstracts of studies retrieved in literature searches to identify studies of coping support interventions for parents of hospitalized children. We extracted data for synthesis according to guidelines provided by Thomas and Harden, and we evaluated study methods using the Downs’ and Black checklist.

Preliminary Findings: We identified 1826 abstracts in initial database searches. Title and abstract review yielded 32 studies meeting inclusion criteria. Included studies investigate multiple types interventions (e.g. educational, art therapy, yoga). Nearly half (n=14) of the studies involved coping support interventions for parents of infants hospitalized in a neonatal intensive care unit (NICU).

Next Steps: Data extraction from relevant studies is ongoing. We expect the results of this review will inform strategic planning of hospital clinical care models to support parents and to support clinicians’ knowledge of coping strategies and humanistic support parents during a child’s hospitalization.

7 – Cultural Variance in Defining Autonomous Medical Decision-Making: A Systematic Review

Subha Perni, AB; David Horowitz, MD; Andrew Einstein, MD, PhD

The principle of autonomy in medicine is conventionally considered to refer to an individual making an unconstrained choice about medical care or research. However, this notion of autonomy could be excluding culturally influenced real-world medical decision-making processes. Our review explores cultural variance in conceptions of autonomy in medical decision-making. It analyzes different manifestations of and constraints upon autonomy, and assesses how this variance might impact providers, patients, and families.

Adapting the “critical interpretive synthesis” model of Dixon-Woods et al., we are employing a highly iterative approach involving repeated modification of research questions and search strategies with the aim of allowing definitions of autonomy and gaps in knowledge to emerge. Starting with search of the PubMed and Scopus databases, we are critically appraising papers for relevance and robustness. Thus far, we have found a body of theoretical work, quantitative survey studies, qualitative interview-based studies that have challenged the notion of patient autonomy as a “common-sense” ethical norm, and discussed notions of autonomy that identify a family or group as the subject of autonomous rights in medical decision-making, rather than an individual agent.

We will continue this iterative process and integrate our data into a coherent, pluralistic theory of the meaning of autonomy and its applications. We will also consider how the literature has constructed autonomy and its relationship to culture. For the MTL community, we have methodological questions about levels of inclusiveness of evidence and whether narrowed focus on decisions about death and end-of-life care may be appropriate.

8 – Domains of Quality for Clinical Ethics Case Consultation: A Mixed-Method Systematic Review

Louis Lesliea; Rebecca Frances Cherry, MS; Abbas Mulla, MS; Jean Abbott, MD, MH; Kristin Furfari, MD; Jacqueline J. Glover, PhD; Benjamin Harnke, MLIS; Matthew K. Wynia, MD, MPH

Background: “Clinical ethics consultation” (CEC) is the provision of consultative services by an individual or team with the aim of helping health professionals, patients and their families grapple with difficult ethical issues arising during health care. There are almost 25,000 articles in the worldwide literature on CEC, but very few explicitly address measuring the quality of CEC. We aim to compile the diverse literature on CEC, analyzing it with a quality assessment lens, and seeking a set of potential quality domains for CEC based on areas of existing, but hitherto unrecognized, consensus in the literature.

Methods: We initially did a modified meta-ethnography but eventually switched to a mixed-methods approach.

Preliminary Findings: Through consultation with qualitative methods experts, biostatisticians, editors from Systematics Review Journal, and others we realized that our initial methodology did not best serve the field of clinical ethics.

Potential Impact: This mixed-methods approach will compile and formally synthesize the literature and to derive a framework for assessing quality in clinical ethics, which often addresses the humanistic backbone of medical practice.

Next Steps: Completing the initial scoping review.

Questions for the MTL community: What are the key insights you all have in how methodology informs the final synthesis?

9 – Evidence Synthesis of Shared Medical Appointment Implementation as a Humanistic Approach to Patient-Centered Experience

Kim Ha Wadsworth, OMS2; Trevor Archibald, OMS2; Anita Cleary, MLIS; Byron L. Haney, MD; Adam Hoverman, DO, DTMH; Allison Payne, OMS-1

Background: Over the last 18 years, shared medical appointments (SMA) have proven an effective model for chronic disease management and preventive care. Several systematic reviews summarize the clinical, process and economic outcomes of SMAs, however no systematic synthesis of patient experience outcomes yet exists.

Objective: We aim to understand opportunities, barriers and limitations to SMAs based on enhancing patient experience, an important component of the “quadruple aim,” specifically addressing: What works for patients? What doesn’t work? Why or why not? Our hope is these answers will guide future implementation and translational studies, in particular inclusion of SMAs within early, patient-centered, clinical experience in health professional education.

Methods: We conducted a librarian-facilitated literature search of MEDLINE (PubMed), Cochrane Library, PsycINFO, CINAHL, Web of Science, and SSRN for peer-reviewed publications, using controlled vocabulary, keywords, and text words. Identifying knowledge gaps within these databases, we also searched grey literature, nonempirical reports and social science publications. We excluded case studies and publications prior to 1997 along with studies focused on patients under 18 years old due to improved proxy measures needed for patient satisfaction in this age group. The initial search yielded 911 papers, including qualitative, quantitative or mixed studies of variable quality. Review of citation title and abstract by two independent reviewers to determine eligibility is ongoing. Data abstraction of full-text articles using a standardized form will be conducted. When a meta-analysis is appropriate, we will use random-effects models to synthesize the available evidence quantitatively using 95 percent confidence intervals. For qualitative literature, we will identify and address research themes related to patient experience using thematic and textual narrative synthesis to provide context for extracted data.

10 – Mapping the Methodological Landscape of Humanism Research

Martina Kelly, MD; Deirdre Bennett, MD; Tim Dornan, MD; Rachel Ellaway, PhD; Heather Ganshorn, MLIS; Helen Reid, MD; Sarah Yardley, MD

Background: We are exploring how to choose literature review methodologies for humanism research. This is important because more methodologies exist than many people appreciate. We aim to help teachers and researchers benefit from that full range. Our objective is to identify, analyze, and organize informative reviews into a map of the methodological landscape.

Methods: A ‘meta metasynthesis’ like this is novel so we have had to:

- Develop a closely integrated team working across geographical and disciplinary boundaries
- Agree on a definition of humanism for a systematic search of bibliographic databases
- Refine the search and identify informative, predominantly qualitative reviews
- Choose between ways of appraising them critically
- Pilot a data extraction form

Difficulties Have Been:

- Defining humanism and its interrelationship with humanities
- Defining ‘quality’ across disparate methodologies

Consistent Weaknesses in the Evidence Have Been:

- Authors have not made clear their epistemological positions
- Reflexivity has often been lacking in reviewers’ work

Potential Impact: Some trends, including the conflation of humanism with professionalism and humanities, have moved humanism from bedside to classrooms. Our intended impact is to relocate humanism within clinical workplaces.

Next Steps: Having found ways of conducting this research, our next steps will be to extract data from reviews, analyze the findings, and synthesize conclusions from them.

Questions for the MTL Community: The MTL community can help us develop a language to disseminate this work and ensure it has the intended impact.

11 – Equalizing Voices: Neutralizing the Power Hierarchy in Healthcare

Sara Kim, PhD; Christina M. Surawicz, MD; Jay Pal, MD; Neil Baker, MD; Andrea L. Ball, MLS, MSIM

Background: Our literature review focus is as follows: What are salient characteristics of employee, leadership and organizational culture that contribute to speaking up or suppressing opinions when power hierarchy is present? From 156 conflict narratives collected from 93 healthcare providers and patients, a key theme emerged around their sense of feeling disempowered to bridge power differentials.¹ Power gradient and individual voice have not been extensively examined in healthcare.

Methods: We are conducting a scoping review of studies from aviation, business, political science, psychology, and sociology using protocols including: (1) identifying the research question; (2) identifying relevant studies; (3) study selection; (4) charting the data; and (5) collating,

summarizing, and reporting results. Keywords include power, status, conflict, upward communication, implicit voice theories, and voice behaviors.

Preliminary Findings: Two hundred twenty articles are being screened for inclusion for review. Our team has read and discussed five common articles for identifying emerging themes pertaining to facilitating and inhibiting factors of speaking up. New insight so far involves individuals' concerns for others' reputation as a barrier to speaking up and moral distress from being a bystander when individuals opt to remain silent.

Potential Impact: Activation of individual voices requires leaders' understanding of complex factors that promote or discourage providers' self-advocacy.

Next Steps: We will finalize the screening of articles for inclusion and the coding scheme for extracting key information from articles.

Questions for the MTL Community: Do you know of effective interventions that promote speaking up behaviors?

1. Kim, S, Buttrick, E, Bohannon, I, Fehr, R, Frans, E, Shannon, SE. When Focusing on the Patient is Complicated: Conflict Narratives from the Healthcare Frontline. *Conflict Resolution Quarterly*, In press.

12 – Humanism and the Premedical Realm(s): A Narrative Overview and Preliminary Analysis

Monica Cuddy, MA; Frederic W. Hafferty, PhD; Phillip K. Hafferty, MA; Mark Hanson, MD, MEd, FRCPC; Steven L. Kanter, MD; Tina Martimianakis, PhD; Robin Michaels, PhD; Barret Michalec, PhD

Background: Despite consistent reference to cultivation or deterioration of humanistic traits, attitudes, and practices among premedical students, there has been no encompassing synthesis of the premedical literature specifically pertaining to humanism aside from a review of “the premed syndrome”.

Methods: We are reviewing the literature on premedical education and training in the U.S. and Canada and examining specifically how it pertains to humanism and humanistic principles. The research team is working with a librarian to identify pertinent literature through MEDLINE, PubMed, PsycINFO, Social Science Citation Index, Sociological Abstracts and four other databases. Once this data gathering approach has been exhausted we will utilize the “snowball” technique to identify other relevant texts.

We will be utilizing a Narrative Literature Review process to analyze the literature (1422 texts by 3/1/16) and: a) provide categories of the prominent and consistent discussions and debates within the premedical discourse, and b) examine the presence and nature of “humanism” in these discussions.

Results: Though we are still gathering the literature, we have already identified preliminary “thematic categories” (i.e. conversations): Admissions, Changes to the MCAT, Curriculum Reform (with sub-topics of Enhancing the Sciences/Rigor, Enhancing the Humanities and Social Sciences), Stress & the “Pre-Med Syndrome”, and Attitudes & Attributes, among others. At this preliminary

stage we find humanism discussed mainly within the conversations of Enhancing the Humanities, Stress & the “Pre-Med Syndrome”, and Attitudes & Attributes. Analysis seems to suggest that many conversations are time-specific. For example, the Enhancing the Sciences/Rigor conversation was “popular” in the ‘60s and 70’s, and the Stress & “Pre-Med Syndrome” conversation happened mainly within the 80s and 90s. The Changing the MCAT conversation has been more recent.

13 – Blending Emotion and Cognition in Critical Care Conversations: How Physicians Can Support Family Comprehension and Values-Based Decisions

Laura Rock, MD; Julia Whelan, MS, AHIP; Robert Arnold, MD; Helen Riess, MD; Margaret Coletti, AMLS; Jenny Rudolph, PhD

Background: Having a critically ill loved one is the cause of high rates of emotional distress and mental illness in families, yet critical care clinicians are poorly prepared to recognize and manage the emotion in our patients, their families and ourselves. Without training it is unlikely that clinicians will address family emotions with skill or help families arrive at optimal value-based, clinically sound decisions.

Methods: Following Cochrane guidelines, we searched five databases, collected cited references and did follow-up searches. We asked 5 experts to provide 1-5 references they thought relevant. This netted 450 citations for analysis.

Preliminary Findings: Emotion influences the process and outcome of critical care conversations, yet providers often fail to address emotions. Emotion regulation influences cognitive state, physiologic response, comprehension and decision-making. For example, “affect labeling” or naming an emotion, causes neurobiological effects that decrease emotion intensity. Emotion regulation allows physicians to explore the crucial concerns underlying emotion. Adapting negotiation strategies offers an approach to discovering a family’s key values and finding common ground between their concerns and provider expertise.

Potential Impact: A scientifically grounded approach to emotion regulation and value exploration help reveal what is meaningful to families and can promote profound connections.

Next Steps: Connect the causal mechanisms of emotional response and emotion regulation to key negotiation practices that allow physician and family to arrive at optimal solutions.

Questions for the MTL Community: What are identifiable outcome variables for improved emotion regulation and values clarification?

14 – Teaching the Humanity of Evidence-Based Medicine: Informed by the Literature, Guided by the Physician, Framed by the Patient

Andrew M. Vosko, PhD; Kathryn M. Pate, PhD; Brian D. Schwartz, MLIS; Nicole Michels, PhD

Ideal Evidence Based Medicine (EBM) education involves incorporating research-derived evidence with humanistic principles and the uniqueness of patients. Reports describe curricular implementation of EBM focusing on the evidentiary perspective, irrespective of the patient. The investigation examines and evaluates effective teaching of EBM in medical education, combining patient values, literature appraisal, and physician expertise.

We conducted a systematic review, re-examining teaching EBM in the undergraduate curriculum, using OvidMedline, PubMed, and ERIC, published since 2005. To ensure comprehensiveness, relevant, high-impact medical education journals were chosen. MeSH terms associated with EBM and medical education were chosen.

Inclusion criteria are curricular incorporation, and assessment. We will examine literature based on format, assessment, and outcomes. EBM curriculum will be evaluated through the Best Evidence in Medical Education criteria, and outcomes organized according to the Kirkpatrick Scale. These analytical tools parse teaching methods and outcomes into categories. The goal is to identify methods for effective, humanities-laden teaching of EBM.

Preliminarily, we found discussion of the evidence retrieval process, with humanistic principles emerging in case-based reports. A hurdle is sifting through the data to identify humanistic values. Next steps with the group include optimizing the search strategy, and determining the methodology to extract humanistic qualities. Questions for the MTL community involve the best ways to data mine for patient context within EBM curricula.

15 – What is the Impact of Reflection as a Teaching Tool in Graduate Medical Education? Examining the Evidence

Abigail Ford Winkel, MD; Sandra Yingling, PhD; Aubrie Ann Jones, MFA, MS; Joey Nicholson, MLIS, MPH

Reflection can improve professional development and care of patients through introspection, meaningful synthesis and deliberate sharing of insights. There is limited evidence of the impact of reflection on graduate medical trainees, who are at a critical point of development. Greater understanding of the impact of reflection as a teaching tool will inform faculty how to harness its potential.

To create a scoping review, a systematic literature search was conducted using PubMed/MEDLINE, EMBASE, and ERIC. A combination of keywords and subject headings was used. Studies were included that used reflection as an educational intervention. Exclusion criteria included studies focused on undergraduate medical education, or those that used reflection as a means of data collection.

Results: 1308 articles were screened by title and abstract, leaving 124 articles for full text review. At that stage, 85 further articles were excluded and 32 articles selected for data extraction.

Reflection has many meanings in medical education. We focused on reflection as a tool for introspection. In some articles, reflection is included with multiple other components (e.g. portfolios). In others, reflection was used to refine the answer to a clinical question, or to understand another phenomenon. We excluded these studies, which did not allow the impact of reflection itself on the development of the trainee to be distilled.

Next Steps: Complete data extraction from the 32 selected studies, describe results systematically. We anticipate this will help guide programs that enhance professionalism and compassionate care.

Questions for the MTL Community: How do you define “Reflection”? What kinds of study design provide evidence that reflection has an impact on trainee development? How can we measure the impact that reflection has on trainees’ attitudes and behaviors toward their clinical teams, the patients in their care, and the larger community of practice?

ADVOCACY & DISCOVERY ABSTRACTS

1 – Activate For Inquiry: A Model for Creating and Sustaining a Culture of Speaking Up

Sara Kim, PhD; Jennifer Best, MD; Ross Ehrmantraut, RN; Stephanie J. Schulz; Christina M. Surawicz, MD; Christian Cote; Kelly Edwards, PhD; Chuck Sloane, JD

Background: The Arnold Gold Foundation funded a study, *Healthcare Conflict at Individual, Interpersonal and Organizational Levels: A Scoping Review* (under review by the Journal of Interprofessional Care). A notable gap was found in providers' skills and comfort to speak up about patient care issues.

Issues Addressed: Speaking up skills are typically taught as verbal skills without recognizing individuals' emotion or environmental context that underlies advocacy behaviors. Our project, Activate for Inquiry, builds upon this major gap in training.

Project Description: The project targets: (1) strategies for recognizing inner barriers; (2) activating motivation to speak up; (3) engaging in inquiry; (4) sustaining resilience as an agent of change; and (5) adaptation of 'speaking up' strategies to speaker/receiver roles. Selected outcomes include: (1) culture of safety survey; (2) patient safety reports; (3) ACGME Resident Surveys; and (4) self-reported 'speaking up' comfort. Participants will advocate Activate for Inquiry to five professional colleagues.

Potential Impact: Creating a culture of safety depends on leaders' recognition of emotional distress associated with speaking up and providers' awareness of inner barriers, engagement in inquiry and self-advocacy, thus honoring one's own voice.

Next Steps: Our project stakeholders will discuss the preliminary curricular scaffold. Two residency programs and two clinical sites are being recruited to complete training. Collaborations with Sigall Bell and Will Martinez, who are experts in assessment of speaking up behaviors, are underway.

Question to MTL Community: What are your thoughts on the scope of this project?

2 – Advocacy and Training to Improve Patient-Centered Technology (iPaCT) Use in the Digital Age

Wei Wei Lee, MD, MPH; Lolita Alkureishi, MD, FAAP; Anita Samarth; Michael Banks, MD; Mary Kay Czerwiec, RN, MA; Vineet Arora, MD, MAPP

Background: Our review¹ (published in JGIM) on the impact of EMR use on patient-doctor communication identified EMR-related behaviors that negatively (i.e. poor eye-contact) and positively (i.e. engaging EMR to encourage questions) impacted communication. Despite negative behaviors, the majority of studies examining patient perceptions found no change with EMR use. Furthermore, although best practices exist, few providers receive training to optimize EMR-based communication.

Using these findings, we developed and implemented a curriculum for trainees and faculty at the University of Chicago on Improving Patient-Centered Technology use (iPaCT) and with this grant;

we will advocate for improved physician training on these skills and disseminate our curriculum to novel audiences. We will also develop advocacy tools to help increase patient awareness of the EMR, and promote ways they can get involved with its use.

Thus far we are in development of a provider CME video on best practices, and video exploring patient perspectives of their provider's EMR use. We are also developing comics for patients and providers as a novel way to increase awareness of how to use the EMR together, and are looking to present at upcoming conferences. We aim to study use of these tools for their impact on patient-satisfaction and patient-provider communication.

It is our hope that by increasing not only physician but also patient awareness, we can help promote collaborative, educational and engaging use of the EMR. We aim to disseminate our toolkit through various means including social media, and would love suggestions from the group on possible avenues and ideas!

1. *Impact of Electronic Medical Record Use on the Patient-Doctor Relationship and Communication: A Systematic Review.* Alkureishi MA, Lee WW, Lyons M, Press VG, Imam S, Nkansah-Amankra A, Werner D, Arora VM. *J Gen Intern Med.* 2016 Jan 19

3 – Organ Donation across Cultures: Developing Best Practices

Margot Phillips, MD; Tess Lauricella, BA; Helen Riess, MD

The Empathy and Relational Science Program at Massachusetts General Hospital completed a systematic review of Cross-Cultural Nonverbal Expressions of Empathy in 2015. Subsequently, the director of Organ Donation at MGH approached our research group seeking optimization of the informed consent process for organ donation. With this project, we are conducting a literature review to identify best practices in communication for clinicians offering organ donation in cross-cultural encounters. Building on our previous work, we seek to identify practices that enhance nonverbal and verbal communication and empathic connection across cultures.

To date, we have conducted a MEDLINE search, which yielded 1234 results. After removing 12 duplicates, two team members narrowed the results to 452 studies. We are currently refining the results based on our inclusion and exclusion criteria to identify relevant studies to analyze in detail.

Initial findings confirm an expected gap in the literature about cross-cultural informed consent for organ donation. Numerous studies assess general attitudes of immigrant groups towards organ donation or donor registration. Much less is available about encounters between a minority patient's family and clinical staff when a patient suffers brainstem death. Similarly, few studies report best practices of the informed consent process, and even fewer in a cross-cultural context. There remains much to be learned about strategies to enhance trust, share information, dispel myths, and provide emotional support to bereaved families during discussion of organ donation, particularly in cross-cultural encounters.

Future directions are to develop and test clinical training informed by our research, with the hope of maximizing empathic and humanistic care of families considering organ donation.

4 – Mindfulness Interventions for Family Caregivers of Patients in Home Hospice

Jennifer Tjia, MD, MSC; Sr. Pat Foley, RN, BSN; Jane Givens, MD, MSCE

Background: Our Gold Foundation Literature Review project¹ supported a systematic review and meta-analysis reporting stress reduction benefits from meditation for informal caregivers. We identified a need for more research to examine meditation effects on burnout, caregiver burden, and bereavement, and the need for meditation intervention studies for hospice caregivers who face a complex range of psychological stresses and remain at risk for significant adverse outcomes. It remains unclear how to design an intervention that best serves the needs of this population.

Project Description: Our Discovery Project proposes to conduct a 2-phase study. Phase I will survey actively enrolled and bereaved hospice family caregivers to assess the level of interest in, and constraints of participating in an intervention. Based on the results of Phase I, in Phase II we will adapt the delivery of both the existing in person and online MBSR courses offered by the UMass Center for Mindfulness to the home hospice setting.

Expected Outcomes and Next Steps: We expect to understand the unique challenges of this population, and gain insight into a feasible intervention addressing their needs. We are actively addressing two challenges. The first challenge is trailblazing new ground regarding the human subjects protection issues about conducting a mindfulness-based intervention project for this vulnerable population. The second challenge is distinguishing between the needs and challenges of 2 related populations – pre-bereaved (active caregivers) and bereaved caregivers.

Questions for the MTL community: Breaking new ground at your IRB entails a hidden cost to research and investigator time. What resources do you enlist to help?

1. Dharmawardene M, Givens J, Wachholtz A, Makowski S, Tjia J. A systematic review and meta-analysis of meditative interventions for informal caregivers and health professionals. *BMJ Support Palliat Care*. 2015 Mar 26.

5 – A Qualitative Study of Preferred Institutional Approaches to Control of Work-Home Interference for Physicians

Colin P. West, MD, PhD; Lotte N. Dyrbye, MD, MHPE; Fred W. Hafferty, PhD; Tait D. Shanafelt, MD

Background: Our systematic review of approaches to physician burnout found 15 randomized controlled trials in the world literature complementing 36 observational studies. Overall, interventions targeting both individual strategies and organizational strategies appear to offer the potential for substantial benefit in reducing burnout. However, data are insufficient to determine which approaches are most effective.

Central Research Question: Prior work has identified work-home interference as one key driver of physician well-being and satisfaction. Our central research question is to ask physicians which specific approaches their employer/institution are offering or could offer to most effectively reduce work-home interference.

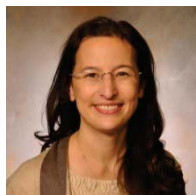
Methods: We will apply qualitative methodology according to a grounded theory approach, first organizing focus groups of Mayo Clinic practicing physicians to explore their perspectives on work-home interference and current or potential interventions. We plan to conduct 6 focus groups with 6-8 physicians per group and representation from both sexes, all medical disciplines, and all career stages. Focus groups will be moderated by specialists from Mayo Clinic’s qualitative research community, and a focus group guide is in development. Theoretical saturation will be assessed through ongoing review of focus group transcriptions and analytic memos using NVivo, and additional focus groups will be recruited if necessary after member checking to ensure adequate coverage of concepts and categories.

Potential Impact: The results of this project will inform the development and testing of organizational interventions incorporating the most desired approaches. These findings will impact humanistic healthcare by adding to the “toolbox” we have to promote physician well-being and thereby optimize physicians’ abilities to dedicate themselves to their patients in a sustainable manner.

Next Steps: We are developing the initial focus group guide and securing IRB approval, after which recruitment of study participants may begin. Next steps include conducting the focus groups, data transcription and analysis, member checking and follow-up focus groups (if necessary), and manuscript preparation over the coming 12 months.

Questions for MTL Community: We do not have any specific questions at this early stage of our project. However, we welcome thoughts from the MTL community on improvements, modifications, or additional areas of focus for our study.

SYMPOSIUM PARTICIPANTS



Lolita Alkureishi, MD
malkureishi@peds.bsd.uchicago.edu

Lolita is an Assistant Professor in Academic Pediatrics at the University of Chicago. Her research interest lies in developing curricula on how medical providers can use the Electronic Medical Record (EMR) and technology with patients in a collaborative manner in order to enhance communication and understanding. Last year, with her colleagues Drs. Wei Wei Lee and Vinny Arora, they completed a literature search on patient-centered EMR use. With the support of the Gold Foundation, their proposal "Advocacy and Training to Improve Patient-Centered Technology (iPaCT) Use in the Digital Age" hopes to translate their best practice findings into a set of practical communication resources for providers and patients alike.



Louise Aronson, MD, MFA
Louise.Aronson@ucsf.edu

Louise Aronson, MD, MFA, is a geriatrician, writer and Professor of Medicine at the University of California, San Francisco (UCSF) where she is Chief of Geriatrics Education and Director of Medical Humanities. Her writing appears in literary and medical journals and in the lay press, including the New York Times, Washington Post, the New England Journal of Medicine, JAMA, and the Lancet. Her first book, *A History of the Present Illness*, was published by Bloomsbury in 2013.



Vineet Arora, MD, MAPP
varora@medicine.bsd.uchicago.edu

Vineet Arora, MD, MAPP, a board certified internist, is an academic hospitalist, Assistant Dean of Scholarship & Discovery, and Director of GME Clinical Learning Environment and Innovation at University of Chicago. In the latter role, she bridges educational and hospital leadership to integrate residents and fellows into the quality, safety, and value missions of the institution. Through AHRQ, NIH, and ABIM Foundation funding, she has developed and evaluated novel interventions that combine systems change with adult learning theory to improve care and learning in teaching hospitals. She has authored over 100 peer-reviewed publications, with coverage in the New York Times, NPR, and the Associated Press. She currently serves on the Board of Directors for the American Board of Internal Medicine. As the Director of Educational Initiatives at Costs of Care, she co-chaired the Teaching Value Choosing Wisely Challenge and co-authored *Understanding Value-Based Healthcare*, from McGraw Hill. For her work, she has received the American College of Physicians Walter J. McDonald Young Physician Award, the Society of Hospital Medicine's Excellence in Hospital Medicine Research Award, and the Society of General Internal Medicine's Fred Brancati Leadership and Mentorship Award. In 2011, she was named to "20 People Who Make American Healthcare Better" by *HealthLeaders Magazine*. Dr. Arora earned her medical degree at the Washington University in St. Louis and completed her residency, chief residency, and Masters in Public Policy at the University of Chicago. Dr. Arora regularly tweets about medical education, technology, and health policy at @futuredocs.



Anthony Back, MD
tonyback@uw.edu

Anthony Back, MD, is Director of Palliative Care at the Seattle Cancer Care Alliance, an outpatient consultation service, and Professor of Medicine/Oncology at the University of Washington. His academic research focuses on improved patient-clinician communication. He is also head of a gastrointestinal oncology practice in the Seattle area, and an Affiliate Member of the Fred Hutchinson Cancer Research Center. Dr. Back received his bachelor's from the Humanities Honors Program at Stanford University and his MD from Harvard Medical School.



Hanah Bae, MS
baehanah@gmail.com

Hanah Bae's academic focus is on mental health. She has worked as a research assistant for several studies focused on mental health, including a suicide prevention study and a mental health screening study for hospitalized children. Currently, she is working for Tangram, a wellness-promotion startup company, while she prepares to attend medical school. She earned her Bachelor's Degree in Liberal Arts from Cairn University in 2014 and her Master's Degree in Education with a concentration in Mental Health Counseling from the University of Pennsylvania in 2015.



Maren Batalden, MD, MPH
mbatalden@challiance.org

Maren Batalden, MD, MPH, is the Associate Chief Quality Officer at the Cambridge Health Alliance (CHA) and Assistant Professor at Harvard Medical School. She studied English and Religion in college and taught high school English for two years before pursuing public health and medicine. She earned an MPH degree at UNC-Chapel Hill and worked for two years designing and evaluating public health programs related to youth violence prevention before coming to medical school at Harvard. Maren completed an internal medicine residency at the Brigham and Women's Hospital and post graduate fellowships in both medical ethics and medical education before taking a clinical position as a hospitalist at CHA. She served as Associate Program Director for the Internal Medicine Residency Program at CHA for 7 years and in 2011 assumed a leadership role in quality improvement at CHA. She has collaborated with Dr. Gaufberg as a teaching partner in humanistic curricular endeavors for residents and medical students for nearly a decade and has co-authored four publications with Dr. Gaufberg related to teaching reflective practice and creating relationship-oriented cultures of practice in health care settings. Her current focus is on shaping a health system at CHA that nurtures the personal and professional development of staff and providers, delivers patient-centered care, and operates effectively as a safe, high quality, high-value system. She has support from the Arnold P. Gold Foundation this year to lead a mid-career Innovation Fellowship for clinician leaders at CHA that marries improvement science and relationship-centered care using the frame of “co-producing” healthcare service.



Jennifer A. Best, MD

jabest@uw.edu

Dr. Jennifer Best is an Associate Professor of Medicine in the Division of General Internal Medicine at the University of Washington. She received her undergraduate degree from Seattle Pacific University and medical degree at Northwestern University. She returned to the UW for internal medicine residency and chief residency and practices hospital medicine at Harborview Medical Center, on the clinician-educator pathway. Dr. Best completed the UW Teaching Scholars program in 2009 and has been the recipient of several teaching awards. She is a Fellow of the American College of Physicians and Society of Hospital Medicine and a past Deputy Editor of the Journal of General Internal Medicine. She serves as UW Associate Dean for Graduate Medical Education and Associate Program Director for Resident Professional Development and Wellness for the UW Internal Medicine Residency Program. Her clinical and scholarly interests include vulnerable populations, care transitions, systems education and the GME training environment.



Alison Brecher, MPH

abrecher@abim.org

Ms. Brecher is a Program Manager for the ABIM Foundation. As Program Manager, she manages the ABIM Foundation Forum as well as other professionalism-related activities such as the John A. Benson Jr., MD Professionalism Article Prize. Additionally, Ms. Brecher supports Foundation initiatives through the facilitation of meetings, research, writing and other high-level projects. Prior to joining the Foundation, Ms. Brecher was a Contact Center Representative with ABIM where she answered inquiries from candidates, program directors, outside organizations, and the public regarding the American Board of Internal Medicine. Previously, she worked as an Assistant Language Teacher with the JET Programme in Shibukawa, Japan. Ms. Brecher received her bachelor's degree in behavioral science and French from Drew University and holds a Master of Public Health from Thomas Jefferson University.



Era Buck, PhD

erbuck@utmb.edu

Era Buck, PhD, is a Senior Medical Educator in the Office of Educational Development and an Associate Professor of Family Medicine. She has been designated as a University of Texas Distinguished Teaching Professor and a UT Scholar of Professional Identity as well as a member of the Academy of Master Teachers. She is co-chair of the Education Research Committee of the School of Medicine at UTMB and serves as a faculty member for the Scholars in Education and Scholars in Healing faculty development programs. She is active in the development and implementation of learner assessments and program evaluation. She is currently engaged in research and training in the areas of competency based education, evaluation and assessment and professional identity formation.

Rebecca Cherry

rebecca.cherry@ucdenver.edu

Rebecca Cherry is a master's student at the University of Colorado Denver studying chemistry. She received her bachelor's degree in chemistry in 2013. She started working on this project in early 2015 due to an interest in healthcare and ethics within healthcare.



Margaret S. Chisolm, MD

mchisol1@jhmi.edu

Margaret S. Chisolm, MD, is Associate Professor of Psychiatry and Behavioral Sciences at Johns Hopkins University. At Hopkins, she serves as Associate Director of the Paul McHugh Program for Human Flourishing and Director of Education for the Bayview campus, site of the first year of the Hopkins psychiatry residency training program. Dr. Chisolm has over 2 decades of clinical experience in both general and specialized psychiatric outpatient and inpatient settings, and she is board-certified in both psychiatry and addiction medicine. Dr. Chisolm has served as PI or co-investigator on several National Institute of Health-funded scientific and educational research projects. She is co-author of a textbook on psychiatric evaluation and has written more than 75 scientific and clinical articles about substance use and other psychiatric disorders, humanistic practice, and medical education. Her work has been published in *Academic Medicine* and *JAMA*, among others. Dr. Chisolm is a member of the Miller-Coulson Academy of Clinical Excellence, an Arnold P. Gold Foundation Humanism Scholar, and the recipient of the 2014 Johns Hopkins University Alumni Association Excellence in Teaching Award.



Christian Cote'

christian.cote@uhn.ca

Christian Cote' is Special Advisor on Strategy and New Media for the University Health Network, a group of four world class hospitals in Toronto, Ontario. His role is to leverage his award winning storytelling skills to help UHN doctors, scientists and healthcare workers disseminate their achievements to a mass audience. He also works to maximize story reach by leveraging all aspects of Social Media. In addition, UHN senior management calls on Cote' to advise on communications strategy and execute roll-out on major initiatives, including the current move of transforming UHN's culture to become a High Reliability Organization. As well, Cote' delivers story telling workshops, and media and accountability interview training for UHN senior leadership. Cote' is a former award winning former CBC Television producer specializing in investigative journalism, current affairs, and news leadership. In 2007 after 17 years at CBC he left to pursue his lifelong passion for sports. He has since produced over 150 features and documentaries about Olympic athletes and helped create a 7 part NBC/CBC TV series following NHL players to the 2014 Sochi Olympics. In his 25 year TV career he has developed the reputation of a gifted storyteller with exceptional interview, writing, directorial, and producer skills.



Deborah Danoff, MD
ddanoff@earthlink.net

Dr. Danoff's background encompasses clinical, administrative and academic medicine, including 25 years in medical education. A graduate of McGill University Faculty of Medicine, she practiced as a clinical immunologist as well as serving as Associate Dean, Undergraduate Medical Education at McGill. She continues as adjunct faculty at both McGill and the University of Ottawa. Her other senior administrative roles have included Director, Office of Education, Royal College of Physicians and Surgeons of Canada (RCPSC) and Assistant and then Associate Vice President, Division of Medical Education, Association of American Medical Colleges (AAMC). In her career she has consistently advanced scholarly activities to assure humanistic quality health care. This includes supervision of and research using data from the AAMC Medical Student Graduation Questionnaire as well as the development and piloting of a tool to assess cultural competence education. Most recently she has focused on issues related to professionalism and professional identity formation.



Carolyn S. Dewa, MPH, PhD
carolyn.dewa@camh.ca

Dr. Carolyn Dewa heads the Centre for Addiction and Mental Health's Centre for Research on Employment and Workplace Health. She is also a Professor in the University of Toronto's Department of Psychiatry and the Institute of Health Policy, Management and Evaluation. She holds a PhD in health economics from the Johns Hopkins University and a MPH in health services administration from San Diego State University. She was a fellow at the Harvard Medical School. Her awards have included an Ontario Ministry of Health and Long-Term Care Career Scientist Award and a Canadian Institutes of Health Research/Public Health Agency of Canada Applied Public Health Chair.



Perry Dinardo
perry.b.dinardo@gmail.com

Perry is a 2014 graduate of Duke University, where she majored in Psychology with minors in Chemistry and Theater Studies. Perry is currently working as a Gold Foundation Research Intern, and is thrilled to contribute to the Gold Foundation's work. She also works as a research assistant in a developmental cognitive neuroscience lab at Boston Children's Hospital. Perry will begin medical school in fall 2016.



Tim Dornan, MD, PhD
timothy.dornan@gmail.com

Tim Dornan's background is as an internist and clinical endocrinologist. His metamorphosis into an educationalist began when he was given responsibility for the medical students attached to one of the University of Manchester teaching hospitals. He did a Masters and PhD in the Learning Sciences at Maastricht University and led a medical education group in the University of Manchester. He marked his clinical retirement by joining Maastricht University's School of Health Professions Education as a professor. Since 2014, he has been Professor of Medical Education in Queen's University Belfast, UK. He continues his connection with Maastricht University as Emeritus Professor. He supervises many Masters and PhD students and teaches qualitative research internationally. His fields of special interest are workplace learning and the relationship between emotions, identity, and power in the caring professions. He has an interest in medical humanities and is himself, a practising musician.



Lisette Dunham, MSPH
lisette.dunham@ama-assn.org

Lisette is data analyst II in the Medical Education Outcomes Division at the American Medical Association in Chicago, IL. She received her Master's in biostatistics from the University of Illinois at Chicago, and a BS in statistics from the George Washington University. After several years working with big data and analyzing pharmacy claims, Lisette joined the AMA in the fall of 2013. She currently works on the AMA's Accelerating Change in Medical Education initiative and AMA's Learning Environment Study (LES), including some collaborative research with the Gold Foundation using LES data. She looks forward to continuing to research evidence based techniques to improve physician education.



Louis Fitch
louis.fitch@ucdenver.edu

Louis Fitch was born in Colorado but was raised in a Tibetan Buddhist Monastery in rural Scotland. It was his connection with the Tibetan refugee community that gave rise to his interests in philosophy, ethics, human rights, and healthcare for the underserved. He is currently a second-year medical student at the University of Colorado School of Medicine where he is continuing work with underserved communities and studying clinical ethics as a part of his current research endeavors.



Richard M. Frankel, PhD

rfrankel@iupui.edu

Richard M. Frankel, PhD, is Professor of Medicine and Geriatrics at Indiana University School of Medicine and the Director of the Mary Margaret Walther Program in Palliative Care at the IU/Simon Cancer Center. He is also the Associate Director of the VA Center for Healthcare Information and Communication (CHIC) at the Richard L. Roudebush Veteran's Administration Medical Center. Rich has published more than 225 research papers in the area of physician-patient communication and the use of positive psychology to bring about organizational change. He is also the co-editor, with Tom Inui, of a five book series entitled *Context, Culture and Quality in Health Sciences, Research, Education, Leadership and Patient Care* published in 2012-2013 by Radcliffe Publishers. Rich enjoys cycling, collecting antiquarian books, digital photography and his five children, not necessarily in that order.



Liz Gauferberg, MD, MPH

egaufberg@gold-foundation.org

Dr. Elizabeth Gauferberg is an Associate Professor of Medicine and Psychiatry at Harvard Medical School and Director of the Cambridge Health Alliance Center for Professional Development. She directs Psychosocial Training for the CHA Medicine Residency Program and the Patient-Doctor Course for the Harvard Medical School Cambridge Integrated Clerkship. Dr. Gauferberg co-founded the CHA Medical Humanities Initiative, has established an active collaboration between the Cambridge Health Alliance and the Harvard Art Museum, and is an editor of the CHA Literary Arts Journal, *Auscultations*. Dr. Gauferberg holds several national leadership roles in medical education, including as the Jean and Harvey Picker Director of the Arnold P. Gold Foundation Research Institute, whose mission is to discover and disseminate knowledge about humanizing medicine to improve health and the human condition. Her innovative curricula on professional boundaries, the stigma of addictions, and the hidden curriculum are in use in hundreds of medical training institutions world wide.



Arnold P. Gold, MD

apg1@columbia.edu

Arnold P. Gold, MD, is Chairman Emeritus and co-founder of The Arnold P. Gold Foundation, with his wife, Sandra O. Gold, and several colleagues. Dr. Gold is Professor of Clinical Neurology and Clinical Pediatrics at the College of Physicians and Surgeons, Columbia University, where he has been associated for more than 50 years. An author of more than 80 published articles and many text books in the field of pediatric neurology, including *Neurology of Infancy and Childhood*; *Rudolph's Pediatrics*; *Shirkey's Pediatric Therapy* and *Merritt's Textbook of Neurology*. Dr. Gold is the recipient of many special awards, lectureships and professorships, including the National Brennerman Award in Pediatrics. Dr. Gold received both the "Practitioner of the Year" award and the "Dean's Distinguished Service Award" during his tenure at Columbia University College of Physicians and Surgeons.

Dr. Gold has served as a member of the Board of Trustees for the American Medical Association Foundation, and in 2000 he became the AMA Foundation's Secretary. The Dr. Arnold P. Gold Child Neurology Center at the Morgan Stanley Children's Hospital of New York-Presbyterian Hospital, Columbia University Medical Center, was dedicated and opened in 2003. The capstone of his long career was receiving "The Lifetime Achievement Award" from the Child Neurology Society. An Honorary Doctor of Humane Letters Degree as conferred upon him by the Mount Sinai School of Medicine, and with his wife, Sandra Gold, he was awarded Honorary Doctorates in Humane Letters from The University of Medicine and Dentistry of New Jersey and Sacred Heart University in Connecticut. They also each received "The Special Recognition Award" from the Association of American Medical Colleges.

Arnold Gold established the Arnold P. Gold Foundation in 1988 with the power of an idea – to nurture and preserve the tradition of the caring physician. That idea was conceived in response to a trend that Dr. Gold witnessed. He feared that burgeoning scientific discoveries and advances in technology were shifting the focus of medicine from caring for the whole person to an over-reliance on technology. Physician trainees were at growing risk for becoming scientifically proficient and technically well-trained, but lacking in caring and compassion.



Sandra O. Gold, EdD
sgold@gold-foundation.org

Dr. Sandra Gold is the co-founder of the Arnold P. Gold Foundation, a public charity which promotes humanistic, patient centered & collaborative healthcare practice. Through her 25 year stewardship, the Gold Foundation has become an internationally known leader in creating innovative medical education programs and advocating for caring hospital communities. She now serves as counselor to the current president of the Gold Foundation, Dr. Richard Levin.

Dr. Gold is also the founder of group homes for individuals with disability in Bergen County, NJ; and founder of The JCC Thurnauer School of Music, a member of the Guild of Community Music Schools which is a grantee of the National Endowment for the Arts and the NJ council of the Arts. A devoted civic leader, Dr. Gold has served as a board member and officer of numerous local and national organizations, including the Jewish Community Association of North America, the Florence G. Heller Research Center, the Myoclonus Research Foundation and the Jewish Educational Service of North America. She is a board trustee and/or past president of several New Jersey agencies, among them The Jewish Home at Rockleigh, The Adler Aphasia Center and the 13,000-member Jewish Community Center of the Palisades, a full-program social service agency. Dr. Gold received her doctorate from Rutgers University, and with her husband, Dr. Arnold Gold, she received Honorary Doctorates in Humane Letters from the University of Medicine and Dentistry of New Jersey and Sacred Heart University in Connecticut. In 2013 they each received “The Special Recognition Award” from the Association of American Medical Colleges.

Among her active volunteer leadership service is membership on the Columbia University Health Sciences Advisory Council, The Naomi Berrie Diabetes Center Advisory Committee, The New Jersey Medical School Advisory Council, The New York Presbyterian Hospital Committee on Environment and Service Excellence, and the Health Sciences Advisory Council Committee on Campus Community.

Dr. Gold is the mother of 5 children and a devoted grandmother to her 13 grandchildren.



Frederic W. Hafferty, PhD

fredhafferty@mac.com

Frederic W. Hafferty is Professor of Medical Education, Associate Director of the Program for Professionalism & Values, and Associate Dean for Professionalism, College of Medicine at the Mayo Clinic. He received his undergraduate degree in Social Relations from Harvard in 1969 and his Ph.D. in Medical Sociology from Yale in 1976. He is the author of "Into the Valley: Death and the Socialization of Medical Students" (Yale University Press); "The Changing Medical Profession: An International Perspective" (Oxford University Press), with John McKinlay; "Sociology and Complexity Science: A New Field of Inquiry" (Springer) with Brian Castellani, "The Hidden Curriculum in Health Professions Education" (Dartmouth College Press) with Joseph O'Donnell, "Understanding Professionalism" (Lange) with Wendy Levinson, Katherine Lucy, and Shiphra Ginsburg and "Place and Health as Complex Systems: A Case study and Empirical Test" (Springer) with Brian Castellani, Rajeev Rajaram, J. Galen Buckwalter and Michael Ball. He is past chair of the Medical Sociology Section of the American Sociological Association and associate editor of the Journal of Health and Social Behavior. He currently sits on the Association of American Medical College's Council of Faculty and Academic Societies and the American Board of Medical Specialties standing committee on Ethics and Professionalism. Research focuses on the evolution of medicine's professionalism movement, mapping social networks within medical education, the application of complexity theory to medical training, issues of medical socialization, and disability studies.



Paul Haidet, MD, MPH

phaidet@hmc.psu.edu

Paul Haidet is a general internist, health-services researcher, educator, husband, father, and lover of jazz music. He received his undergraduate and medical degrees from Penn State University, and completed a residency in internal medicine at the Milton S. Hershey Medical Center and Penn State University Hospital. He then pursued the Harvard Faculty Development Fellowship in General Internal Medicine at the Beth Israel Medical Center in Boston, MA, and completed his Masters in Public Health at the Harvard School of Public Health. After that, he joined the faculty of the Baylor College of Medicine, and was a member of the Health Services Research and Development Center of Excellence at the Michael E DeBakey Veterans Affairs Medical Center in Houston Texas. After 11 years at Baylor, Dr. Haidet and his wife Mary Lynn Fecile, a pediatric oncologist, relocated back to Penn State, where he inaugurated the role of Director of Medical Education Research and serves as Professor of Medicine, Humanities, and Public Health Sciences at the Penn State College of Medicine. Dr. Haidet has published widely on a variety of topics related to teaching, communication, and the humanistic care of patients, and he has won a number of regional, national, and international awards for his work. His current interest is in the improvisational aspects of patient-physician communication, and he is using his lifelong interest in jazz to create new educational methods and models to foster advanced communication skills among physicians at multiple levels.



Stanley Hamstra, PhD

shamstra@acgme.org

Dr. Hamstra joined the ACGME in November 2014 as Vice President, Milestone Research and Evaluation. He is responsible for oversight and leadership regarding Milestones for residency training programs and the associated assessment system that inform decisions around resident progression and board eligibility. Dr. Hamstra works with outside organizations, including medical subspecialty societies, program director groups and organizations, the American Board of Medical Specialties, and specialty certification boards, to collaborate with and inform them of ongoing research and evaluation activities. His research addresses medical education broadly, with a focus on competency assessment for residency training programs, developing administrative support for educational scholarship within academic health settings, and bringing humanities and social sciences into health professions education.



Ellen Hedstrom

ehedstrom@gold-foundation.org

Ellen is an undergraduate at Boston College in the class of 2016 who is studying philosophy and medical humanities. She is an editor of *The Medical Humanities Journal of Boston College* and volunteers as a certified EMT-Basic in Boston College EMS. Ellen plans to earn a master's degree in Bioethics and is enjoying contributing to and learning from the Gold Foundation's goal of promoting compassionate, humanistic healthcare.



Eric Holmboe, MD

eholmboe@acgme.org

Dr. Holmboe, a board certified internist, is Senior Vice President, Milestones Development and Evaluation at the Accreditation Council for Graduate Medical Education (ACGME). From 2009 until January, 2014 he served as the Chief Medical Officer and Senior Vice President of the American Board of Internal Medicine and the ABIM Foundation. He originally joined the ABIM as Vice President for Evaluation Research in 2004. He is also Professor Adjunct of Medicine at Yale University, and Adjunct Professor of Medicine at the Uniformed Services University of the Health Sciences and Fineberg School of Medicine at Northwestern University. Dr. Holmboe is a graduate of Franklin and Marshall College and the University of Rochester School of Medicine. He completed his residency and chief residency at Yale-New Haven Hospital, and was a Robert Wood Johnson Clinical Scholar at Yale University.



Adam Hoverman, DO, DTMH

ahoverman@pnwu.edu

Dr. Hoverman serves at Pacific Northwest University as course director for Clinical Skills I, adds global health and parasitology components to the Community Doctoring and second-year systems curricula, and is Clerkship Director for the Year 4 Global Health Elective. Following graduation from A.T. Still University, he completed an osteopathic internship in Miami, Florida, and a family medicine residency at the University of Minnesota. There he served a chief residency year and completed the university's global health course. After fulfilling his scholar's service obligation to the National Health Service Corps with the Yakima Valley Farm Workers Clinic, he completed the Diploma of Tropical Medicine and Hygiene at the London School of Hygiene and Tropical Medicine, and is a diplomat of the Royal College of Physicians. Having first discovered the grandeur of the Yakima Valley in 1997, Dr. Hoverman continues his deep admiration for the region as an attending physician at Family Health Care of Ellensburg. He is also currently engaged in developing health literacy programs focused on violence prevention in the Yakima Valley and serves as medical director for Doctors for Orphans promoting health literacy programs in rural and underserved settings worldwide. While developing global health curricula and workforce evaluations for PNWU, partnering universities and healthcare organizations throughout the Americas he also is engaged with several Community-Based Participatory Research projects addressing Maternal and Child Health Outcomes and Indigenous Health, both in the Pacific Northwest and the Andean Highlands of South-Eastern Peru.



Aubrie Ann Jones

aubrie.jones@gmail.com

Aubrie Ann Jones holds a MFA in creative writing and an MS in Narrative Medicine, and has led reflective writing programs with medical interns, obstetrics & gynecology residents and palliative care fellows using literature to introduce and guide discussion around death & dying, making mistakes, professionalism, and other sensitive subjects.



Martina Kelly, MB BCh, MA, CCFP

makelly@ucalgary.ca

Martina Kelly is a family doctor and director of undergraduate family medicine, University of Calgary. Originally from Ireland, she moved to Calgary in 2012. Her Master's in education examined reflective practice in clinical placement learning (2007). She is curious about how to explore day to day experience as a form of evidence in clinical care. Currently she is working on her PhD, a series of qualitative studies, using a phenomenological lens, on the meaning of touch in clinical practice.



Sara Kim, PhD
sarakim@uw.edu

Dr. Sara Kim, Research Professor of Surgery, received her PhD in Education from University of Washington in 1999. Currently, she serves as Associate Dean for Educational Quality Improvement and Director of Educational Innovations and Strategic Programs at the Institute for Simulation and Interprofessional Studies (UW-ISIS), University of Washington. She is the inaugural holder of the George G. B. Bilsten Professorship in the Art of Communication with Peers and Patients. Dr. Kim actively teaches and leads research in conflict management and collaborates with a wide range of stakeholders across UW Medicine to develop an organizational capacity in communication skill training. Dr. Kim has numerous peer-reviewed publications in leading medical education and surgery journals, covering topics of physician communication skills, assessment, teaching and learning practices.



Brandy King, MLIS
bking@gold-foundation.org

With a Master's degree in Library and Information Science, over a decade of experience as a health science librarian, and several board level positions in library associations, Ms. King is a skilled and respected information professional. She earned her BA from Smith College and her MLIS from Simmons College then worked at Brigham & Women's Hospital and Boston Children's Hospital before coming to the Gold Foundation in 2012. As the Head of Information Services at the APGF Research Institute she is responsible for finding, organizing and disseminating research on humanism in medicine and maintaining the Foundation's website, blog and social media.



Tess Lauricella
tlauricella@mgh.harvard.edu

Tess Lauricella is currently coordinating research at Massachusetts General Hospital's Empathy Relational Sciences program and Harvard University's Suicide and Self-injury Lab. She graduated Magna Cum Laude from Skidmore College in 2015 with a B.A. in Psychology, writing her honor's thesis on future thinking and memory distortion. Lauricella has additional experience working in social psychology and positive psychology research, as well as fieldwork with autism spectrum disorders and leadership in health promotion. In the future, she aspires to combine her interest in cognition and health psychology, a field in which she hopes to address maladaptive behaviors and improve patient outcomes.



Wei Wei Lee, MD, MPH

wlee6@uchicago.edu

Dr. Lee is the Assistant Dean of Students at the Pritzker School of Medicine, Core Faculty and Assistant Director of Ambulatory Education at the University of Chicago's Internal Medicine Residency program. She graduated from Wellesley College with a degree in psychobiology and is a graduate of New York University School of Medicine. She earned a Masters of Public Health degree from the Harvard School of Public Health in 2006. She completed her residency in Internal Medicine at NYPH- Weill Cornell in 2010 where she also served as an Ambulatory Chief Resident. Dr. Lee joined the faculty at the University of Chicago in 2010. She was selected as an Associate Junior Faculty Scholar for The University of Chicago's Bucksbaum Institute for Clinical Excellence in 2012 in recognition of her dedication to improving the patient- doctor relationship. Dr. Lee's academic interests are focused on developing curricula to enhance patient-centered technology use and promote patient-doctor communication in the computerized setting.



Richard I. Levin, MD, FACP, FACC, FAHA

rlevin@gold-foundation.org

Richard I. Levin, MD, became the President and CEO of The Arnold P. Gold Foundation in August of 2012. He is concurrently an Emeritus Professor of Medicine in the Division of Cardiology at McGill and in the Leon H. Charney Division of Cardiology at New York University. Before coming to the Foundation, he did a sabbatical year as Senior Scholar in Residence at the Association for Academic Health Centers in Washington, D.C. focusing his work on the effects of healthcare reform on leadership in academic medicine. Between 2006 and 2011 he served as the Dean of the Faculty of Medicine and Vice-Principal for Health Affairs at McGill University in Montreal, Quebec. Previously, and for twenty-five years, he served in a variety of positions at New York University including professor, director of the laboratory for cardiovascular research and the training program in cardiovascular diseases and Vice Dean for Education, Faculty and Academic Affairs. Dr. Levin earned a B.S. in Biology with Honors from Yale University in 1970 and graduated from the NYU School of Medicine where he was elected to Alpha Omega Alpha in 1974. He was Senior Chief resident in Internal Medicine at Bellevue in 1997-1998, completed a cardiology fellowship at NYU and then a postdoctoral fellowship in vascular biology at the Specialized Center for Research in thrombosis at Cornell University Medical College. He has enjoyed a rich life as physician, educational innovator, scientist, inventor, company founder, and essayist. The author of numerous papers, he has lectured widely in the United States and abroad. His honors include a Clinical Investigator Award from the National Heart, Lung and Blood Institute of the National Institutes of Health in the U.S., the Valentine Mott Medal, the Ester Hoffman Beller Research Award and election to Fellowship in the Canadian Academy of Health Sciences. He has been a national board member and officer of numerous professional U.S. organizations including past President of the New York and Heritage affiliates of the American Heart Association. In Canada, he was President of the Council of Deans of the Faculties of Medicine of Quebec and Chairman of the Board of the Canadian Resident Matching Service. Dr. Levin's professional interests include endothelial cell biology, the prevention of atherothrombotic events, the nature of empathy, the reformation of medicine for the support of compassionate, collaborative care and the role of the new information technologies in medical education and practice. He resides in New York with his wife, Jane. They have two daughters and three grandchildren.



Karen V. Mann, BN, MSc, PhD

karen.mann@dal.ca

Dr. Mann participated on the Mapping the Landscape Proposal Selection Committee. She is Professor Emeritus in the Division of Medical Education at Dalhousie University. She also holds an Honorary Professorship in Medical Education at Manchester Medical School, in Manchester UK. She is involved in teaching, research and development across the medical education continuum. With colleagues Tim Dornan, John Spencer, and Albert Scherpbier, Dr. Mann co-edited and wrote a textbook of medical education: *Medical Education: Theory and Practice*. She was PI on a Health Canada study in inter-professional education. Current research interests are in self-assessment and feedback, reflection, assessment, professional identity formation, and distributed medical education. She serves on the editorial boards of Medical Education, the Journal of Continuing Education in the Health Professions, Perspectives in Medical Education and the Canadian Journal of Medical Education. She also supervises Masters and PhD students, and has been involved in developing and teaching in higher degree educational programs for medical and health professions faculty.



Barret Michalec, PhD

bmichal@udel.edu

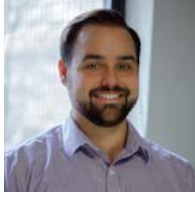
Dr. Barret Michalec is an Associate Professor in the Department of Sociology, the Assistant Director of Health Research at the Center for Drug & Health Studies (CDHS), and the Director of the Health Science Advisement and Evaluation Committee (HSAEC) at the University of Delaware. He also holds an Adjunct Research Assistant Professor position within the Department of Family and Community Medicine at the Sidney Kimmel Medical College of Thomas Jefferson University. Dr. Michalec earned his PhD in Sociology from Emory University in 2000. His research primarily explores: a) the socialization and professionalization processes associated with health professions training and education, b) race and gender-based disparities in the health and healthcare, and c) patient experience and interactions in healthcare settings.



Nicole Michels, PhD

nmichels@rvu.edu

Nicole Michels is Chair of the Department of Medical Humanities and an Associate Professor of Physiology at Rocky Vista University College of Osteopathic Medicine. Dr. Michels received her Ph.D. from the University of Nebraska Medical Center in 2007 where she studied immune responses to cell death induced through DNA damage. She subsequently did a postdoctoral fellowship at National Jewish Health, focusing on the immune response to Mycoplasma pneumoniae in asthmatics. Subsequent to entering the medical education realm, Dr. Michel's research interests refocused on education with a particular focus on understanding how students learn and how educators can incorporate humanistic components of disease states in the instruction of medical students.



Joey Nicholson, MLIS, MPH
joseph.nicholson@med.nyu.edu

Joey Nicholson is the Education and Curriculum Librarian and the Coordinator for Systematic Review Services at NYU's School of Medicine. In these roles he works with students and faculty to improve their information literacy skills, complete systematic reviews, and support their research projects. Prior to coming to NYU, Joey traveled the US teaching day-long PubMed courses for the National Library of Medicine.



Molly Ward Olmsted
molly.ward.olmsted@gmail.com

Molly is a 2015 graduate of Whitman College where she studied Biology and Chemistry. She currently works with the Gold Foundation as a volunteer and at the Dana Farber Cancer Institute as a clinical research coordinator in the gynecology department. Molly has enjoyed working with the Gold Foundation and hopes to attend medical school in the future.



Kathryn M. Pate, PhD
kpate@rvu.edu

Kathryn Pate is the Director of Research at Rocky Vista University, and an Assistant Professor of Physiology in the Department of Biomedical Sciences. Kate received her doctoral degree in physiology from the University of Florida, where she studied the neural control of breathing. She has a broad research background and has been involved in the medical education of nursing students, osteopathic medical students, allopathic medical students, and veterinary students. Her scholarly pursuits include clinical-translational research in addition to medical humanities research. Within the humanities, Kate is interested in the teaching of evidence-based medicine, as well as the incorporation of the arts and mindfulness meditation into the medical curriculum.



Subha Perni, BS
sp3128@columbia.edu

Subha Perni is a medical student at Columbia University's College of Physicians & Surgeons. She graduated from Princeton University in 2011 with a degree in philosophy, and wrote a thesis exploring the justifications for reliance on intuition in moral decision-making. Before attending medical school, she worked at the Primary Care Coalition, a non-profit aiming to improve access and quality of care for low-income, diverse, and uninsured patients. Her research interests are in oncology, medical ethics, and narrative medicine. Currently, she is taking a research year, and is working on a project examining cultural variance in conceptions of autonomy.



Kara Pothier

kpothier@gold-foundation.org

Ms. Pothier is the Assistant Director of Communications and Marketing for the Arnold P. Gold Foundation. She handles media and public relations for the foundation and manages the development and distribution of print and digital communications. She received a BS in Journalism from the University of Illinois and has an MA in Teaching from the College of New Jersey. Prior to her role at the Gold Foundation, she worked as a television producer for *Nick News with Linda Ellerbee* where she covered news and created content for a broad range of topics including health, politics, science, education, social and legal issues, sports, and the environment. Her work as producer of an episode about kids and autism earned her a primetime Emmy award.



Luisa Raleza

researchinstitute@gold-foundation.org

Luisa is an Administrative Coordinator for the Research Institute and provides grant management and administrative support for the "Mapping the Landscape" project.



Helen Riess, MD

hriess@mgh.harvard.edu

Helen Riess, MD, is Director of the Empathy and Relational Science Program in the Department of Psychiatry at Massachusetts General Hospital and Associate Clinical Professor of Psychiatry at Harvard Medical School. Her research team at MGH conducts translational research utilizing the neuroscience of emotions to enhance patient-clinician communication and relational skills. The Empathy Program also provides clinician coaching and consulting services. Dr. Riess' research has been awarded the 2013 Partners Healthcare Medical Education Research Award, the 2012 Harvard Coaching Institute Research Award, and the 2013 SUNY Medical University Endowed Gilbert Humanism in Medicine Lecture Award. Dr. Riess is an internationally recognized speaker on empathy, recently giving a TEDx talk on "The Power of Empathy." Her empathy training curricula are implemented internationally in healthcare, business and education. She is Co-Founder, Chairman, and Chief Scientific Officer of Empathetics, LLC, a company that provides web-based empathy training and related relational skills solutions.



Laura Rock, MD
lrock@bidmc.harvard.edu

Dr. Rock is a Pulmonologist and Critical Care Physician at Beth Israel Deaconess Medical Center in Boston, MA and an Instructor of Medicine at Harvard Medical School. For the past five years her primary focus has been developing, implementing and teaching Critical Care communication skills training programs for interns, residents and fellows and teaching using simulation. She teaches Intensivetalk, a program for teaching Critical Care Fellows advanced communication skills and was honored with the 2012 Putnam Scholar award of the American Academy on Communication in Healthcare. She completed the 2013-2014 Rabkin Fellowship in Medical Education. With the Center for Medical Simulation she teaches in comprehensive faculty development courses in which we emphasize enhancing reflection and learning through an atmosphere of curiosity and respect. She has become fascinated with the profound influence emotion seems to have over our ability to listen, process information and make effective decisions.



Brian D. Schwartz, MLIS
bschwartz@rvu.edu

Brian Schwartz, MLIS, is an associate professor in the medical humanities department at Rocky Vista University, as well as the Director of Medical Informatics and the Writing Center. Brian has a master's degree in library and information science from the University of Denver and is currently a doctoral candidate in the school of Information Management at Emporia State University. His scholarly interests are in medical humanities, information literacy, educational theory, and evidence-based medicine; and his current research is an investigation of medical information literacy education and patient-specific context.



Mark Siegler, MD, MACP
msiegler@medicine.bsd.uchicago.edu

Mark Siegler, MD, MACP, is the Lindy Bergman Distinguished Service Professor of Medicine and Surgery at the University of Chicago, Founding Director of the University of Chicago's MacLean Center for Clinical Medical Ethics and Founding Executive Director of the Bucksbaum Institute for Clinical Excellence. Dr. Siegler has practiced and taught internal medicine for more than forty-five years. He has published more than 200 journal articles, 50 book chapters and five books. His textbook, co-authored with Al Jonsen and William Winslade, *Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine*, 8th Edition (2015), has been translated into nine languages and is widely used by physicians and health professionals around the world.



Aleesha Shaik

aleesha.shaik@gmail.com

Aleesha Shaik is currently a second year medical student at Drexel University. She received her Bachelors in Molecular and Cellular Biology and French Literature from Johns Hopkins University. Aleesha is working towards a Medical Humanities Scholar Certificate and a Women’s Health Scholar Certificate at Drexel. She is currently spearheading a project to raise awareness about the homeless population and the healthcare issues they face in a blog entitled “Homeless but Human.” As the AMA student group president at Drexel, she organized a TED Talk-style event in February featuring prominent Philadelphia speakers to promote the medical humanities and broaden student perspectives. Aleesha aspires to be a cardiologist and hopes to continue to contribute to humanism in medicine throughout her career.



Arabella Simpkin, MA, BMBCh, MRCPCH

arabella.simpkin@gmail.com

Dr. Arabella Simpkin is a graduate of the University of Oxford and a Senior Pediatric Registrar in the London Deanery, UK. She is currently a student in the Master of Medical Sciences in Medical Education program at Harvard Medical School. Arabella is the Founder and Director of Greyscale Spaces which looks to provide professional training to enhance resilience and tolerance of ambiguity, which is where her research interest lies. Arabella is a Research Fellow at the Arnold P. Gold Foundation Research Institute. She believes that humanism is a core principle and professional value that can be deliberately studied, explained, and supported, and is excited to be part of a challenging phase of educational transformation. She is committed to designing innovative approaches to the teaching of medicine that develop a more patient-centered approach, and she is the Course Director of a new medical education curriculum at Imperial College in London - the Integrated Clinical Apprenticeship. Arabella has been fortunate to work in healthcare environments in South Africa, Australia and the UK. Outside of medicine Arabella commits time to yoga, travel, and cooking.



Susan J. Stagno, MD

susan.stagno@UHhospitals.org

Dr. Susan Stagno is the co-director of the Center for Ethics and Professionalism at University Hospitals Case Medical Center, and lead faculty for the Humanities Pathway at Case Western Reserve School of Medicine. She is Professor of Psychiatry and Bioethics at CWRU SOM and is the Director of Education for the Department of Psychiatry. Dr. Stagno did her residency training in psychiatry at The Ohio State University, and completed a fellowship in Bioethics at the Cleveland Clinic. She is currently participating in the Narrative Practice certificate program through the Center for Narrative Practice, Boston, MA.



Jennifer Tjia, MD, MSCE
jennifer.tjia@umassmed.edu

Jennifer Tjia, MD, MSCE, is Associate Professor of Quantitative Health Sciences and Medicine at the University of Massachusetts Medical School in the Divisions of Epidemiology and Palliative Medicine. She is trained as a clinical epidemiologist and dual-board certified in Hospice and Palliative Medicine (HPM) and Geriatric Medicine. She was named a 2015 Sojourns Leadership Scholar by the Cambia Health Foundation, recognizing her commitment to improving the lives of patients and families through health system transformation. With support from the Gold Foundation, she is developing a research agenda focusing on mindfulness-based interventions to support the wellbeing of informal and professional caregivers of patients with advanced illness.



Lucy Trojanowski, MA
lucy.trojanowski@camh.ca

Lucy Trojanowski is an MSc student at the University of Toronto in the Institute of Health Policy, Management and Evaluation. Her research training and work has taken place at the Centre for Research on Employment and Workplace Health, part of the Centre for Addiction and Mental Health. Lucy's research interests include mental health, employment, and peer support.



Andrew Vosko, PhD
avosko@rvu.edu

Andrew Vosko, PhD, is an Assistant Professor at Rocky Vista University with a joint appointment in the departments of Medical Humanities and Structural Medicine. He received his PhD in neuroscience from the University of California, Los Angeles, where he studied hypothalamic circuitry that regulates biological rhythms. Prior to working at Rocky Vista, Dr. Vosko was Chair of the Basic Sciences department at Southern California University of Health Sciences, where he taught students in the allied health fields. His scholarly interests are in medical humanities, sleep and circadian neurobiology, fatigue in educational settings and in chronic disease, and “neuromyths” in educational practice.



Kim Ha Wadsworth

kim_ha@stanfordalumni.org

Kim has over 15 years of biotechnology industry experience including molecular biology research, new product and technology development, global operations and marketing. She was the first hire in two start-up biotech companies in the CA Bay Area, with unique involvement in all aspects of business. She continued as a key employee in several medium and large biotech companies in So. San Francisco, CA, Boulder, CO and Foster City, CA. She owned an I.T. consulting business in Monterey, CA and volunteered part-time as the director of Competitive Clusters, head coach for high school field hockey at Santa Catalina School, and board member of the Monterey Bay Stanford Club. She is currently attending medical school at PNWU-COM in Yakima, WA. Kim holds a B.S. degree in Biological Sciences from Stanford University.



Carole Warde

cmwarde@va.gov

Carole Warde is a clinician educator in General Internal Medicine. She is currently the Director of a VA Center of Excellence in Primary Care Education (COE PCE) at the Greater Los Angeles VA Health System (GLA). These 7 national centers aim to bring health professions trainees together to deliver, learn and lead Veteran-centered team based care. Each center develops unique approaches and innovative curricula to prepare graduates to work in and lead patient-centered interprofessional (IP) teams. GLA is unique among the centers in that it is based in a Patient-Centered Medical Home serving Homeless Veterans of Los Angeles. The COE IA HPACT will train the next generation of health professionals to care for vulnerable patients in a way that builds patients' self-efficacy while meeting their social, psychological, and physical needs, with empathy and teamwork. Humanism in medicine is central to the center's activities, which include a relationship-centered culture building process, a faculty development program based in humanism and the development of a "pocket toolkit" of specific techniques that help us stay humanistic with our challenging patient population.



Colin P. West, MD, PhD

west.colin@mayo.edu

Originally from Seattle, Dr. West received his MD and PhD in Biostatistics from the University of Iowa in 1999. He completed residency and chief residency in internal medicine at Mayo Clinic, and joined the faculty in General Internal Medicine in 2004. He is currently Professor of Medicine, Medical Education, and Biostatistics at Mayo. He directs the evidence-based medicine curriculum for the medical school, and is an Associate Program Director within the internal medicine residency program. He is also the Research Chair of General Internal Medicine. Dr. West's research has focused on medical education and physician well-being, and he is Co-Director of the Mayo Clinic Program on Physician Well-Being. Working closely with Tait Shanafelt and Lotte Dyrbye, his work documenting the epidemiology and consequences of physician distress, as well as emerging research on solutions, has been widely published in prominent journals including JAMA, Annals of Internal Medicine, and JAMA Internal Medicine.



Julia Whelan, MS, AHIP

jcs.whelan@gmail.com

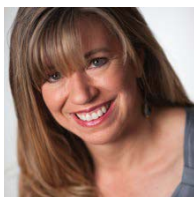
Julia Whelan has 35 years of experience as a medical reference and education librarian. She is currently at Beth Israel Deaconess Medical Center. Her previous positions were at Harvard's Countway Medical Library, MGH, Mass College of Pharmacy and Allied Health, and William James College (MSPP). Her teaching relates to evidence-based practice, diagnostic decision support tools, conducting systematic reviews, and database searching. Her interests include drug information, integrating evidence assessment into information tools, and medicinal plants. She is a member of "Librarians without Borders" as well as a "Citizen Scientist." She has a BA from Swarthmore College, an MS from Simmons.



Abigail Ford Winkel, MD

abigail.winkel@nyumc.org

Dr. Abigail Ford Winkel is the Vice Chair of Education and Residency Program Director in the Department of Obstetrics & Gynecology at New York University Langone Medical Center. She is a fellow in the NYU Institute for Innovations in Medical Education and a candidate for a Master's in Health Professions Education at the University of Maastricht/NYU program. She is co-director of the Transition to Residency Course in the School of Medicine. She earned her B.A. in English from Yale College and her doctorate of medicine from Columbia University College of Physicians and Surgeons. She completed her residency at New York/Presbyterian - Columbia residency program and is a general obstetrician-gynecologist at Bellevue Hospital in New York City. Her academic work focuses on physician wellness, reflective writing, innovative tools for resident education and simulation-based assessment.



Monica C. Worline, PhD

mworline@stanford.edu

Monica Worline, PhD, is an organizational psychologist whose vision is to harness courageous thinking, compassionate leadership, and humanizing culture to create organizations that bring our best work to life. Monica is a research scientist with the Center for Compassion and Altruism Research and Education at Stanford University, where is spearheading projects related to building compassion capability in healthcare. Monica is also an affiliate faculty member of the Center for Positive Organizations at the Ross School of Business, University of Michigan, where she leads the action-learning immersion program emphasizing interdisciplinary approaches to organization studies. Monica has been involved in over 15 years of research related to compassion in the workplace as a founding member and fellow of CompassionLab, a research collaboratory dedicated to exploring the shape and consequences of compassion in organizations. She holds a doctorate in organizational psychology from the University of Michigan and a BA with honors and distinction from Stanford.



Matthew K. Wynia, MD, MPH

matthew.wynia@ucdenver.edu

Dr. Wynia's career has included developing a research institute and training programs focusing on bioethics, professionalism and policy issues (the AMA Institute for Ethics) and founding the AMA's Center for Patient Safety. His research has focused on novel uses of survey data to inform and improve the practical management of ethical issues in health care and public policy. He has led projects on a wide variety of topics related to ethics and professionalism, including understanding and measuring the ethical climate of health care organizations and systems; ethics and quality improvement; communication, team-based care and engaging patients as members of the team; defining physician professionalism; public health and disaster ethics; medicine and the Holocaust (with the US Holocaust Memorial Museum); and inequities in health and health care. He has served on committees, expert panels and as a reviewer for the Institute of Medicine, The Joint Commission, the Hastings Center, the American Board of Medical Specialties, federal agencies, and other organizations. Dr. Wynia is the author of more than 140 published articles, chapters and essays, co-editor of several books, and co-author of a book on fairness in health care benefit design. His work has been published in *JAMA*, *the New England Journal of Medicine*, *Annals of Internal Medicine*, *Health Affairs*, and other leading medical and ethics journals, and he is a contributing editor for the American Journal of Bioethics. He has discussed his work as a guest on the *BBC*, *ABC News*, and *National Public Radio*, among others. Dr. Wynia is a past president of the American Society for Bioethics and Humanities (ASBH), and has chaired the Ethics Forum of the American Public Health Association (APHA) and the Ethics Committee of the Society for General Internal Medicine (SGIM).



Sandra Yingling, PhD

sandrayingling@gmail.com

Sandra Yingling, PhD, was in the Division of Education Quality, Institute for Innovations in Medical Education at NYU School of Medicine. She recently joined the University Of Illinois College Of Medicine as Associate Dean for Education Planning and Quality Improvement. Dr. Yingling, a clinical and research psychologist, focuses on professional identity development and self-regulated learning in the UME-GME continuum.

SELECTION OF “MAPPING THE LANDSCAPE” ACCOMPLISHMENTS

On February 20th, 2016 a special issue of *Medical Education* dedicated to humanism in healthcare was released as a result of a partnership between the Arnold P. Gold Foundation and the AMS Phoenix Project. Both organizations work to support healthcare trainees and professionals in delivering compassionate care.

The special issue contains four literature reviews by Mapping the Landscape teams:

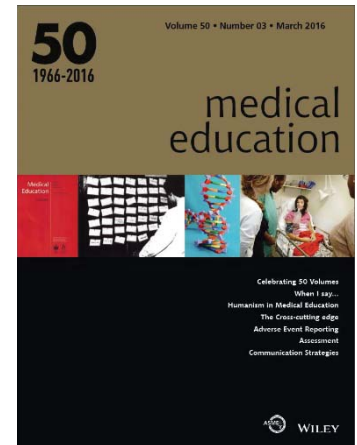
- Cowen VS, Kaufman D, Schoenherr L. A review of creative and expressive writing as a pedagogical tool in medical education. *Med Educ.* 2016;50(3):311-319.
- Dennhardt S, Apramian T, Lingard L, Torabi N, Arntfield S. Rethinking research in the medical humanities: A scoping review and narrative synthesis of quantitative outcome studies. *Med Educ.* 2016;50(3):285-299.
- Haidet P, Jarecke J, Adams NE, et al. A guiding framework to maximise the power of the arts in medical education: A systematic review and metanalysis. *Med Educ.* 2016;50(3):320-331.
- Sulzer SH, Feinstein NW, Wendland CL. Assessing empathy development in medical education: A systematic review. *Med Educ.* 2016;50(3):300-310.

The special issue also includes commentaries from other Mapping the Landscape community members:

- Gaufberg E, Hodges B. Humanism, compassion and the call to caring. *Med Educ.* 2016;50(3):264-266.
- Holmboe E. Bench to bedside: Medical humanities education and assessment as a translational challenge. *Med Educ.* 2016;50(3):275-278.
- Kelly M, Dornan T. Mapping the landscape or exploring the terrain? Progressing humanism in medical education. *Med Educ.* 2016;50(3):273-275.
- Martimianakis MA, Hafferty FW. Exploring the interstitial space between the ideal and the practised: Humanism and the hidden curriculum of system reform. *Med Educ.* 2016;50(3):278-280.

Two Mapping the Landscape literature reviews were selected for the Research in Medical Education (RIME) sessions at the 2015 Association of American Medical Colleges (AAMC) meeting. Authors gave a one hour presentation on their work and their papers were published in *Academic Medicine*.

- Buck E, Holden M, Szauter K. A methodological review of the assessment of humanism in medical students. *Academic Medicine.* 2015; 90: S14-S23.
- Martimianakis MAT, Michalec B, Lam J, Cartmill C, Taylor JS, Hafferty FW. Humanism, the hidden curriculum, and educational reform: A scoping review and thematic analysis. *Academic Medicine.* 2015; 90: S5-S13.



Mapping the Landscape literature reviews have been published in several other prestigious journals as well:

- Alkureishi LA, Lee W, Lyons M, Press V, Iman S, Nkansah-Amankra A, Werner D, Arora V. Impact of electronic medical record use on the patient-doctor relationship and communication: A systematic review. *Journal of General Internal Medicine*. 2016; Jan.
- Dharmawardene M, Givens J, Wachholtz A, Makowski S, Tjia J. A systematic review and meta-analysis of meditative interventions for informal caregivers and health professionals. *BMJ Support Palliat Care*. 2015 Mar 26.
- Rose R, Chakraborty S, Mason-Lai P, Brocke W, Page SA, Cawthorpe D. The storied mind: A meta-narrative review exploring the capacity of stories to foster humanism in health care. *Journal of Hospital Administration*. 2016; 5:1.
- Soklaridis S, Ravitz P, Adler Nevo G, Lieff S. Relationship-centred care in health: A 20-year scoping review. *Patient Experience Journal*. In press.

Two essays inspired by Mapping the Landscape projects have also been published:

- Epstein RM, Back AL. Responding to suffering: What it requires of physicians now. *JAMA*. 2015; 314:4.
- Kelly M, Tink W, Nixon L, Dornan T. Losing touch? Refining the role of physical examination in family medicine. *Can Fam Physician*. 2015;61(12):1041-1043.

Media attention has been given to both Epstein and Back’s work as well as to the work of Alkureishi et al.:



Oaklander M. The one question you really want your doctor to ask. *TIME*. December 22, 2015.

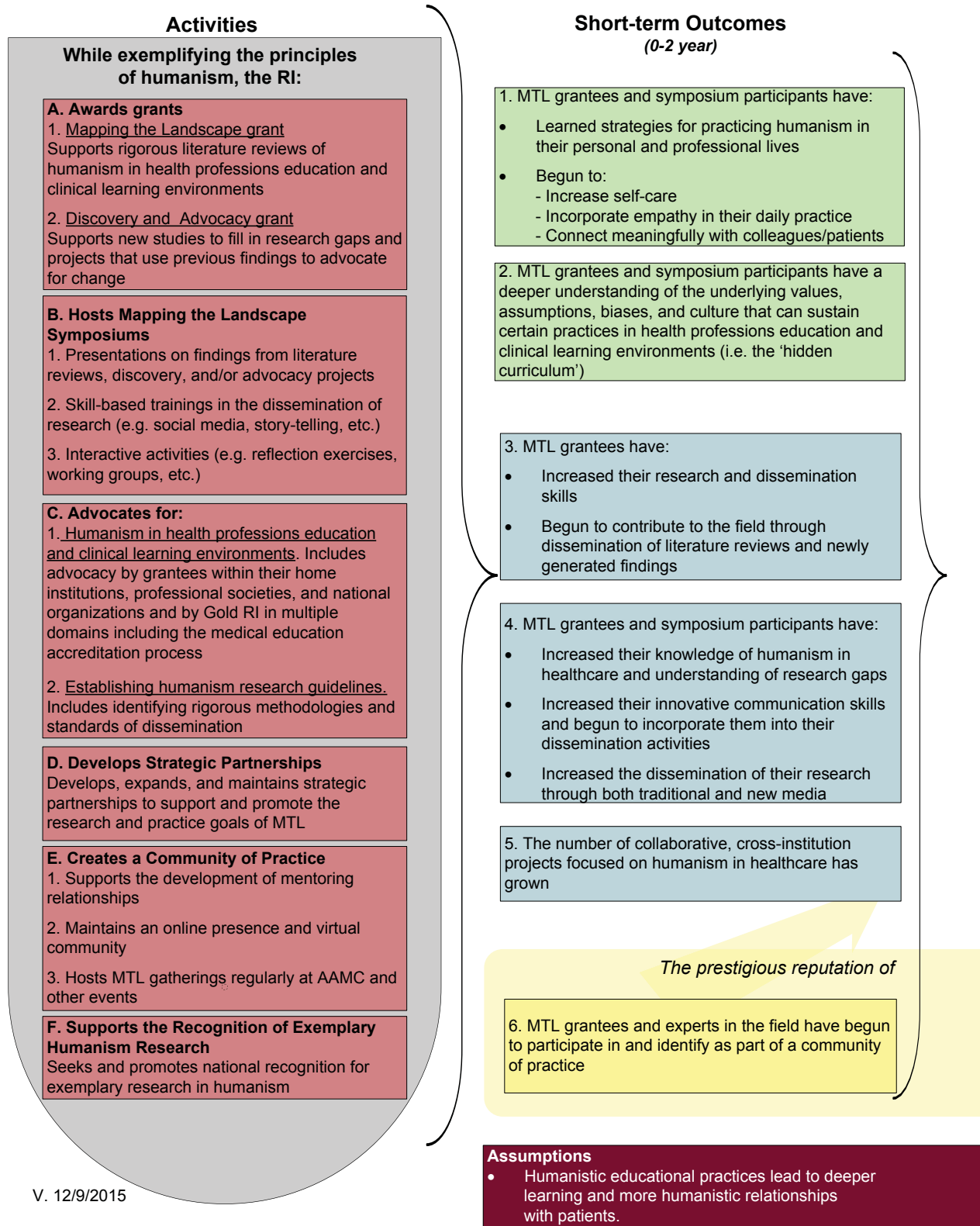


Sun LH. The simple way doctors can make their patients feel understood. *The Washington Post*. December 28, 2015.



Pelletier SG. Teaching medical students to integrate electronic medical records into patient-centered care. *AAMC Reporter*. February/March 2016, 2016.

MAPPING THE LANDSCAPE LOGIC MODEL



**Intermediate-term Outcomes
(2-5 years)**

- 7. Healthcare trainees and professionals have:
 - Increased their practice of self-care and empathy
 - Established stronger connections with peers and patients
- 8. Healthcare trainees and professionals begin to notice and address instances where the 'hidden curriculum' contributes to a negative training/workplace environment
- 9. Standards on humanism-focused research projects have been raised (i.e. more rigorous methodology is used)
- 10. More high quality research on the positive outcomes associated with humanism in healthcare is published in high impact journals
- 11. Strategies for increasing or sustaining humanism are implemented within and beyond MTL grantees' home institutions
- 12. An increased awareness of the value of humanism in healthcare extends beyond MTL grantees and symposium participants to other stakeholders
- 13. More effective curricula are designed and implemented that promote humanism and more methods are developed and used that assess humanistic practices
- 14. An increasing array of healthcare institutions and health professions schools:
 - Provide wellness resources for health professionals and trainees
 - Begin to integrate the principles of humanism throughout their organization

the Mapping the Landscape, Journeying Together community of trainees and experts propels model forward

- 15. Ongoing engagement in, dissemination about, and advocacy for the creation of positive humanistic change in healthcare environments solidifies the MTL as a community of practice

**Long-term Outcomes
(5-10 years)**

- 16. Healthcare trainees and professionals regularly engage in the creation of and experience a positive, humanistic academic and work environment
- 17. Accrediting bodies include a humanism component as a requirement for health professions education instruction
- 18. Healthcare institutions and health professions schools have made significant organizational changes that reduce workplace stressors and promote self-care
- 19. Humanism is deeply integrated into the culture, mission, and vision of healthcare institutions and health professions schools
- 20. Among healthcare academics and practitioners there is a deeper understanding of 'state of the art' humanism research, including research design and findings
- 21. The MTL community of practice is recognized as an influential leader in creating positive change in the field of healthcare

**Impact
(10 years)**

- 22. Research on humanism has been legitimized and is viewed as a science with widely accepted methods and standards of production
- 23. MTL research has contributed to a national understanding of the value of humanism and a body of evidence that informs healthcare policy
- The work of Mapping the Landscape, Journeying Together contributes to:
 - 24. Healthy healthcare trainees and professionals finding joy and meaning in their work, across the career spectrum
 - 25. Healthcare trainees and professionals communicating and interacting in caring and compassionate ways
 - 26. The development of micro and macro systems in health professions schools and healthcare institutions that support humanistic training and care
 - 27. A positive/affirming culture within healthcare and health professions education

- Outcomes related to individual level goals
- Outcomes related to systems level goals
- Outcomes related to organizational level goals

• When humanism is embedded within a system of technically/scientifically excellent practice, it leads to better patient care.

It Is I Who Must Begin

By Václav Havel

It is I who must begin.
Once I begin, once I try —
here and now,
right where I am,
not excusing myself
by saying things
would be easier elsewhere,
without grand speeches and
ostentatious gestures,
but all the more persistently
— to live in harmony
with the “voice of Being,” as I
understand it within myself
— as soon as I begin that,
I suddenly discover,
to my surprise, that
I am neither the only one,
nor the first,
nor the most important one
to have set out
upon that road.
Whether all is really lost
or not depends entirely on
whether or not I am lost.

