Notice to Reader:

→ The following script was created by the University of California, San Francisco (UCSF) and is shared by the Center to Advance Palliative Care (CAPC) for educational purposes only. CAPC is not affiliated with UCSF and does not endorse or officially recommend this script. Rather, this serves as a guide for those looking to implement inclusive interviews.

→ Before using or adapting this script, healthcare employees should consult their organizational leadership to determine if they already have an approved script in place. Healthcare organizations have different policies and protocols that may influence interview approaches.

→ CAPC acknowledges the need to tailor patient interviews to individual organizations. Any adaptation of this script should be done after careful consideration of your organization's guidelines and obtaining necessary approvals.

→ By accessing and using this guide, you agree to consult with your organization's leadership and comply with their policies.
Why Interview?

→ To ensure the provision of exceptional patient care, it is of utmost importance for healthcare providers to cultivate a comprehensive understanding of a patient's background, values, and culture. This understanding enables care teams to develop personalized care plans and engage in interactions that genuinely respect and acknowledge each patient's values, thereby fostering a sense of inclusivity and active listening.

→ Patients who receive culturally competent care, i.e., their unique identity, values, and customs are respected and accommodated for by their care teams, experience several positive outcomes, including:
  1. Decreased rates of emergency room visits.
  2. Expedited recovery from illness.
  3. Reduced utilization of healthcare resources.
  4. Heightened satisfaction levels among patients, their families, and the care team.
  5. Enhanced overall health outcomes.

→ By conducting inclusive interviews, your team can gain insights into how diverse patients perceive the care they receive. This valuable feedback, in turn, empowers you to refine service delivery and ultimately achieve improved patient health outcomes.

→ Below you will find an example script for conducting inclusivity interviews which cover the following topics:
  I. Introduction
  II. Healthcare experience
  III. Patient triggers
  IV. Understanding beliefs and values
  V. Provider feedback
  VI. Demographic collection
  VII. Thanking the patient

Works Cited:

5. How to Improve Cultural Competence in Health Care (tulane.edu)
6. Cultural Competence and Patient Safety | PSNet (ahrq.gov)

Inclusivity Interview:
I. “Example introduction”

Begin by informing the caller of your name, title and the purpose of your call. Be sure to ask permission before starting the survey. See example below:

→ "Hi, my name is *** and I am [a Project Assistant at UCSF]. Last spring you completed a telephone survey about your experience with the UCSF Outpatient Palliative Care Service – [Dr. x’s team]. During that conversation, you said you would be willing to talk with us further to help improve the quality of care we provide. We expect this conversation to take about [30 minutes] and we will provide a [$50 gift card] to compensate you for your time. Are you willing to talk further with us, and if so, is this an ok time for you?"

→ If yes: “Great. Thank you so much. Before we get started with the questions, I would like to share a little more background with you about our goal for these conversations. As I mentioned, we are hoping to improve the quality of care we provide for our patients. We care for patients with various cultural backgrounds, races, ethnicities—and we want to make sure we are providing good, inclusive care to all our patients. So, you may notice some questions asking directly about this. Please know that your responses will be kept anonymous. This conversation will not impact the care you receive at UCSF in any way”.

→ If no: “No problem. Would it be alright for us to contact you at a different time instead?”

→ If yes: “What day and time could work for you?”

→ If no: “I understand. Thank you for your time and I hope you have a good day. “

NOTE!

- Compensation is offered to individuals who participate in surveys under certain circumstances; however, it may not be appropriate in your case. Always verify company policy and check with leadership before offering compensation.

II. “Example healthcare experience”

→ “First, I have a few questions about your experiences before meeting with the *** outpatient palliative care team for your first palliative care appointment.”
→ Before meeting the *** team, what did you think of being referred to palliative care? [If they don’t know what palliative care is, skip to question 4]

→ What was your understanding of palliative care before meeting the outpatient palliative care team?

→ Do you think your life experiences, background, or culture influenced your thoughts and feelings about being referred to palliative care? If so, how?

→ Is there anything that could have been done to make it easier to attend the first palliative care visit?

### III. “Example patient triggers”

→ "Next, I have a few questions about how we can provide the best care possible.’

→ “Thinking about all your experiences with medical care, have you ever felt that you were treated differently from other patients?”
  - If yes: Would you be willing to tell me what happened?

→ Did anything like this come up during your visits with the *** palliative care team?

→ Were there topics that the palliative care team brought up that you did not feel comfortable talking about at any point in the care you received from the palliative care team?
  - If yes: Can you tell me about this?
  - Were there important issues that the palliative care team did not address, but you wish they had?
    - If yes: Can you tell me about this?

→ Did the palliative care team demonstrate respect for your culture and background?
  - If so: Could you share what they did to help you feel that way?
  - If not: I’m sorry to hear this. Could you tell me about this?
  - For all: What are some things the palliative care team could do differently to better respect your culture and background?

→ Did the palliative care team treat you in the ways you wanted to be treated?
  - If so: Could you tell me about this?
  - If not: Could you tell me about this?
→ What are some things the palliative care team could do differently to earn your trust?

**NOTE!**
- If the patient identifies an ongoing issue with their care, be prepared to take action to resolve the issue. Asking for information without taking action will further erode trust in this important relationship.

### IV. “Example understanding beliefs and values”

→ Do you think your life experiences, background, or culture influence how you feel about medical care? If so, how?
→ Do you think your life experiences, background, or culture influence how you talk to your doctors about your symptoms? If so, how?
→ What do you see as the role for loved ones (like family, friends, or other people who are important to you) in your medical care?
→ Do you like to have loved ones involved in medical visits?
→ Did you feel that the palliative care team involved your loved ones too much, not enough, or to the right extent? Can you tell me about this?

### V. “Example provider feedback”

→ “Next, I’m interested in whether you mostly agree, feel neutral, or disagree with the following four statements”

→ “I felt heard and understood by this provider and team.” Would you say “most of the time yes”, “sometimes”, or “most of the time no”?

→ “I felt this provider and team put my best interests first when making recommendations about my care.” Would you say “most of the time yes”, “sometimes”, or “most of the time no”?

→ “I felt this provider and team saw me as a person, not just someone with a medical problem.” Would you say “most of the time yes”, “sometimes”, or “most of the time no”?

→ “I felt this provider and team understood what is important to me in my life.” Would you say “most of the time yes”, “sometimes”, or “most of the time no”?

→ Is there anything else you’d like to share?
VI. “Example demographic collection”

→ “Finally, I have a few quick demographic questions. We might have this information in your chart, but sometimes it’s not up to date there so I just want to confirm”

→ What is your race & ethnicity?
  ○ [Don’t ask following question if using an interpreter]

→ What language do you speak at home?

VII. “Example thanking the patient”

Be sure to end the interview by thanking the patient for their time. Collect any necessary information for delivery if your organization plans to provide compensation.

→ “Thank you again for your time and for sharing your thoughts. Your experience matters to us and your responses to our questions will help us provide better care. Please know that our conversation will be kept confidential. However, is there any part of this conversation that you would like for me to share with your palliative care team to improve your care going forward?”

→ “Could I verify your e-mail address so that we know where to send your gift card?”

→ “Thank you. I hope you have a wonderful day. Goodbye.”