

Risk Management Regarding Scope of Practice

for Healthcare Professionals and Students Abroad

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Abstract

Individuals participating in global health experiences (GHEs) are seldom aware of the issues associated with scope of practice and risk management while practicing abroad. Thus, a need for comprehensive and effective pre-immersion education regarding these subjects was identified. Primary feedback included pre- and post-travel surveys (see Appendix B) conducted during travel with a global medical brigade in conjunction with Village Life Outreach Project (VLOP) in order to gather information from healthcare professionals who have traveled to Tanzania. Participants were asked about their experiences and knowledge gained in regard to their scope of practice and general risk management. Through the use of interactive modules based on the gathered primary and secondary evidence, this project focuses on education for members of the healthcare profession about scope of practice based on their fields and specialties. The consequences, risks, and ethical considerations that come with practicing outside of one's scope while abroad will also be covered in the modules. These modules will be evaluated by healthcare and risk management professionals and subsequently adjusted based on the feedback that was received. Results will become available after primary evidence is obtained through travel surveys and educational module evaluations from healthcare and risk management professionals.

Keywords: scope of practice, risk management, ethical, healthcare, international

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Healthcare professionals, pre-professional students, and others traveling abroad to participate in global health experiences may have the best of intentions, but can ultimately end up engaging in “unethical and potentially illegal” activities, including a “US premedical student... after a 15-minute lecture by a British midwifery student volunteer, [delivering] a baby, unsupervised by Tanzanians” in their healthcare system (Rowthorn, Loh, Evert, Chung, & Lasker, 2019, p.1). Sending “untrained [or] undertrained, unlicensed” students, volunteers, and other professionals on global health experiences can place individual patients, families, and entire communities at risk (Rowthorn et al., 2019, p. 6). In order to address these risks, certain programs and schools have implemented different pre-immersion preparation, including training, readings, and modules. The investigation focuses on students and other health professionals participating in global health experiences and aims to determine the effect of implementing pre-immersion education on their ability to manage risk while upholding ethical principles within their scope of practice abroad. A lack of preparation for students and healthcare professionals prior to engaging in experiences abroad ultimately leads to gaps in care and increased risk for patients in those communities. While every group or individual traveler might have different needs, pre-immersion education that focuses on a broad range of scope of practice, ethics, and safety issues should be included as mandatory preparation.

Literature Search

Students used online databases including CINAHL, MedLine, PubMed, and Academic Search Complete/Premier in order to identify peer-reviewed research that would be most

applicable to the project. Keywords/phrases used to search for current evidence included risk management, scope of practice, abroad, international health professional, nursing care abroad, ethical clinical experiences abroad, and ethical global health experiences. Results were then compiled into an evidence table so that students could examine the findings and the strength of literature sources identified by peers. Once key findings were identified, the evidence was used to structure the project plan and implementation strategy.

Evidence for Practice Change

The four major themes that have been thoroughly researched and that will be discussed below are scope of practice, ethical considerations, risk management, and pre-immersion education. These four themes provide sufficient evidence to call for a change in the current practice of global health experiences.

Scope of Practice

Scope of practice is a concept that many healthcare professionals and students participating in global health experiences are either not informed on or choose to ignore. In a 2019 study, 223 respondents who have conducted medical work abroad participated in a survey that inquired about performing outside of scope. Out of the 223 respondents, 44% had university affiliation (i.e. students, professors, clinical instructors, etc.) (Doobay-Persaud et al., 2019a). The survey showed that 49% of respondents were asked to practice outside of their scope, and 61% reported actually practicing outside of their scope either one or numerous times throughout their stay in another country (Doobay-Persaud et al., 2019a). Evidence from this study also showed that trainees or students were twice as likely to practice outside of scope than trained or licensed professionals (Doobay-Persaud et al., 2019a). These numbers indicate that pre-immersion

education must be implemented before individuals practice abroad, and scope of practice is a vital concept that must be understood.

When scope of practice guidelines and regulations are violated, people can be seriously injured. When it comes to the most common practices that were reported to be performed out of scope, most were not simple or harmless procedures. In fact, most were invasive, complex procedures that pose a major threat to the patient if performed incorrectly. The most common procedures that were practiced outside of scope included “basic ultrasound, fracture management, wound care and suturing of lacerations, endotracheal intubation, vaginal delivery, and neonatal resuscitation” (Doobay-Persaud et al., 2019a, p. 1009). Respondents of the survey reported that the most common reasons they were asked to practice outside of scope “included a mismatch with host expectations, a suboptimal amount of supervision, inadequate preparation to decline requests, a perceived absence of alternative options, and emergency situations.” (Doobay-Persaud et al., 2019a, p. 1009). Furthermore, Doobay-Persaud et al. (2019) writes that most respondents reported long-term distress and moral conflict about practicing outside of scope. In order to prevent inflicting harm to the patient and protecting oneself, it is essential for individuals to be aware of their own scope of practice while abroad.

Ethical Considerations

Engaging in global health experiences, whether clinical, volunteer, or career-based work, requires attention to ethical considerations. Common ethical issues that can arise in global health experiences include a lack of familiarity with the country’s healthcare system, a lack of resources, and emergent situations. Healthcare systems and policies are not interchangeable across all countries, and certain steps must be taken in order to prevent conflict from arising.

Thorough knowledge of a population's cultural values is necessary in order to facilitate upholding ethical principles while practicing abroad. Ethical dilemmas can occur despite having good intentions when participating in global health experiences, so it is important to practice adherence to individual patient and community-held cultural beliefs.

According to Doobay-Persaud et al. (2019b), "ethical and best practice guidelines emphasize that [study abroad] programs should primarily and sustainably benefit the local community" (p. 2). Overall, the goal of practicing and studying healthcare abroad, as at home, should be to do no harm. The article also suggests that ethical considerations "typically [involve] health professionals from high-income countries traveling to low- and middle-income countries for educational, training, capacity-building, or research purposes" (Doobay-Persaud et al., 2019b, p. 2). Moral grey areas can arise when those providers and students from countries with more socioeconomic power, resources, and regulations travel to countries with less. There exists ample opportunity for visitors to overtake the efforts of local providers, who are a permanent fixture in the community. In fostering a dependence on outside assistance, a community's economy and autonomy surrounding healthcare can suffer. Along the same lines, the temptation to impose practices common in one's home country on the community in which they are practicing stifles autonomy and independence in the very community one is attempting to benefit. DeCamp, Lehmann, Jaeel, and Hortwich (2018) state "the ethical principle of justice requires partnering with local leaders to ensure that the potential burdens participants can place on local communities abroad are minimized" (p. 652). Justice for the communities served by visiting healthcare professionals and students is defined by true partnership with those communities and their inhabitants, not only as patients, but as global citizens. In this way, with cultural

competency and the community's best interest kept in the forefront of participants' minds, ethical dilemmas within global health experiences are minimized and ethical considerations are most appropriately observed.

Risk Management

Practicing healthcare in a foreign nation without prior, proper training can pose major risk and threaten the safety of both the patient and the health care provider. In order for the provider to practice safely and effectively, the provider must understand not only his/her own scope of practice, but the cultural practices and beliefs of the nation as well. Failing to comply with the cultural beliefs of a nation poses much risk to the patient since the patient may not be able to understand the details of certain medical procedures to deem them culturally appropriate, therefore making it the providers' responsibility to thoroughly understand the culture in which they are practicing. According to Visovsky, Mcghee, Jordan, Dominic, and Morrison-Beedy (2016), "insight into the local culture is an important aspect of connecting our undergraduate nursing students with the health care experience" (p. 31). In addition to the risks posed to the patient population and the community, there are risks posed to the health care provider population as well. Accidental needle sticks and lacerations, bodily fluid contamination, improper use of personal protective equipment, and musculoskeletal injuries pose a major threat to the safety of healthcare workers who dare to cross their scope of practice boundaries.

Healthcare professionals and students may encounter risks associated with providing care and risks associated with travel abroad in general. Topics of safety such as housing, meals, drinking water, transportation, and information regarding the U.S. Embassy and services that should be contacted in case of emergency should be thoroughly discussed prior to departure.

According to Iserson (2013), “In most developing countries, infectious diseases pose a major threat, not only to the local populace but also to visiting physicians” (p. 25). For example, there are certain regions where specific prophylactic measures to prevent diseases and illnesses such as malaria, dengue, cholera, and yellow fever should be taken. These concerns must be discussed and implemented before the traveler enters the country (Visovsky et al., 2016). Therefore, comprehensive investigation of the nation and risk assessment should be completed and understood by all traveling members of the healthcare team.

Pre-immersion Education

It is evident that pre-immersion training combined with orientation to the destination is the crux of a safe and successful trip while participating in global health experiences. When travel is associated with a university, it is the university’s responsibility to equip their students and their providers with this vital component before their travels. One particular study surveyed 284 nursing and medical students after completing a global health experience abroad. Fifty-three percent of those students were involved with pre-immersion training and orientation. Seventy-seven percent of the students that had pre-immersion training had identified feelings of preparedness for their trip. The students that had prior pre-immersion training identified that the most commonly covered learning domains were safety, cultural training, and health precautions; however, clinical skills and leadership were two significantly desired domains as well (Kironji et al., 2018).

In addition to the study discussed above, Brown supports the use of pre-immersion education and states “pre-immersion preparation can maximize learning during the experience” (as cited in Noone, Kohan, Hernandez, Tibbetts, & Richmond, 2019, p. 236). Noone et al. (2019)

also outlined the usefulness of technology such as utilizing video conferences and online pre- and intra-immersion activities for students preparing to participate in global health experiences. The objectives of these learning activities includes awareness of the community as a client, social determinants of health, impact of policy on community health, and public health ethics. In addition to technology, Noone et al. (2019) also states, “some student groups take a basic course in learning the language prior to travel and invite speakers who are familiar with the visiting culture to share their knowledge and experience with students prior to travel. Students work with their faculty and cohort before traveling to learn about the population health issues in the area they will be visiting” (p. 236). These articles not only provide sufficient data showing that pre-immersion education is crucial, but also provide multiple avenues in which future pre-immersion education can be further developed and thus implemented.

Project Plan and Implementation

A voiceover video presentation was created in order to provide an immersive educational session to a selected audience of key stakeholders including administrative members of the UC Office of Risk Management, Village Life Outreach Project, and UC International faculty leaders. The presentation included detailed explanations of all four main themes of evidence (scope of practice, ethical considerations, risk management, and pre-immersion education) and a detailed explanation of key survey data that was collected by students at the University of Cincinnati during a global health experience with VLOP in Tanzania. The video also describes and shares with the audience an in-depth overview of the pre-immersion educational modules that have been created in order to prevent future lapses in scope of practice as well as to provide for safer, more effective global health experiences. The learning objectives for the education presentation

are: 1) participants will be aware of the current prevalence of lapses in maintenance of scope of practice and nonadherence to ethical principles during GHEs and 2) participants will demonstrate understanding of the need for pre-immersion education on the promotion of risk management and adherence to scope of practice and ethical principles.

The presentation includes detailed information including evidence from research, informative graphs, voice over narrations, and attention grabbing images as means to captivate the audience. The materials were sent via email to the stakeholders in order to accommodate for overlapping schedules and personal time constraints. The specific audience of key stakeholders was selected to ensure the return of appropriate feedback and evaluation comments so future adjustments could be made accordingly. The presentation was emailed to participants during April of 2020 and participants were given a one week timeframe during which they could offer feedback.

Evaluation

The key stakeholders of this project include the UC College of Nursing, UC Office of Management, UC International, Village Life Outreach Project and a few other global health experts recommended by project advisor Dr. Kate York. Project information was sent via email in the forms of a voiceover video of the presentation and a powerpoint containing educational materials. Feedback was returned via email and SurveyMonkey, which included responses to the presentation, learning modules, and the interactive quizzes within the modules. The feedback received from two of our stakeholders revealed that the materials are an effective means of pre-immersion education, and the interactive quizzes within them are a satisfactory way to evaluate the effectiveness of each module. Participants also commented that the structure of the

current modules would be effective for students with little to no understanding of scope of practice differences, but overall should continue to be developed for more advanced learners.

In order to gather first-hand information regarding adherence to scope of practice during global health experiences, another type of feedback was also collected. Students at the University of Cincinnati who participated in a volunteer-based healthcare experience in Tanzania with Village Life Outreach Project surveyed other participants before and after immersion abroad to determine the need for and the effect of pre-immersion education on ability to maintain scope of practice standards while practicing abroad. One of the most telling pieces of information gathered was that every participant in the survey indicated that they were either “very confident” or “somewhat confident” in their ability to stay within their professional scope of practice while providing healthcare abroad before immersion took place, but nearly half of all participants stated in the post-immersion survey that they *did* experience or witness a scope of practice issue while participating in the global health experience.

Recommendation for Future Work Needed

In order to attempt to remedy the identified lapses in adherence to scope of practice as well as to prepare travelers for ethical implications of participating in global health experiences, the UC student group formulated modules to be used in an online learning environment by multidisciplinary healthcare professional and students planning to travel abroad to practice healthcare. These modules focused on five key areas of learning including scope of practice, risk management, ethical considerations, cultural competence, and travel preparedness reminders. It is expected that the modules will be helpful in providing relevant pre-immersion education in accordance with recommendations found in research studies discussed above, and results will

become available at a later time if the modules are implemented by selected groups. It is recommended that these modules will progress over the course of the next few years as UC students and partners collaborate to provide optimal pre-immersion education to healthcare professionals and students participating in global health experiences.

Conclusion

Global health experiences offer a variety of educational pathways by which students can gain an enhanced perspective of global health operations and an increased personal sense of cultural competence. With these benefits in mind, it is important to have a clear understanding of the potential risks that can unfold if ethical considerations and scope of practice standards are not emphasized. Research demonstrates that pre-immersion education is essential for the management of assessed risks to patients, communities, and providers when healthcare professionals and students participate in global health experiences. Safety for all of those involved must also be prioritized by means of thorough pre-immersion education. By adhering to ethical principles and maintaining scope of practice, healthcare professionals and students participating in global health experiences can ensure that their experience will be an optimized learning and personal growth opportunity that mutually benefits the host community and the participants.

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Appendix A

Garret Aini:

After completing and finalizing the Capstone Project, I truly feel as though I am prepared to complete my Nurse Residency Program when I begin my RN position. Pulling on what I learned from Scientific Basis, specifically how to find resources and classifying them was a vital skill to have solidified to be able to complete the Capstone Evidence Evaluation Table. Being able to find relevant, credible and appropriate research/peer review articles is vital in aiding in an RN's practice. In which, it will better advance patient care by allowing practice to be on the cutting edge of development.

Andrew Cunningham:

Being involved in this project was an amazing experience. An important part of becoming a great nurse is being able to conduct research. Research that can help better the practice of nursing and healthcare in general. While working on this project there were multiple takeaways. In the early stages of the project there was collaboration and collection of data. Conducting the research in Tanzania to develop knowledge on the subject first-hand. The importance of having working knowledge and experience is crucial to the success of the project. Rather than having only a pure scholarly experience. Lesson learned moving forward is; always involve your target population in the development of your new policies and research. In the end we learned how to use all the tools we had, in order produce something to effect positive change in the future.

The importance of continually looking for ways to improve the world of nursing and the lives we touch in our time as nurses is important. The best way to make those changes is through

sound and trusted research. The tools given during this project will continuously be honed and sharpened throughout our careers. Ultimately, hopefully, leaving the nursing world a little better than when we entered it.

Kelsey Hillard:

This project deals with a very important and timely topic for nursing and all of society: global health. Working on this project has allowed me to gain a deeper insight into global health as one of my most passionate interests in nursing. Not only do I feel more prepared to enter the nursing workforce as a developing global citizen, but I feel that I have gained an increased sense of cultural competence which will allow me to extend care to my future patients in a more meaningful way. As a soon-to-be nurse, I will keep in mind the importance of relying on evidence-based practice to guide my decision making. On the other hand, this project has given me the foundational tools I may need to be able to challenge the practices that are currently being implemented if I find that something is not working the way it should.

Another result of working on this project has been personal growth in the areas of leadership and teamwork which will undoubtedly influence my practice as I begin working as a nurse and throughout my career. On many occasions throughout the duration of this project, I feel that my leadership actions and my collaboration with other leaders in the team positively affected this project and the group at large. Having a substantially-sized project group and receiving less feedback than expected from key stakeholders were just two of many challenges we faced, but overall we worked together to develop a meaningful project that I hope will benefit those participating in global health experiences in the future.

Nicole Holtz:

Being involved in this research project has taught me many things that will soon be applicable to my professional nursing career. From our project content I have learned the importance of knowing my scope of practice in the clinical setting as well as abroad in order to prevent risks of harming myself or my patients. This is something I will stay up to date on and commit to memory for my next nursing abroad experience. This project has also taught me to work to develop teamwork and collaboration between the eight members assigned to this project as well as our stakeholders. This will be highly applicable for when I enter the field of nursing because I will be working as a part of a team. Along with teamwork and collaboration, this project has taught me the need for good communication when working with a team. When good communication needs are expressed clearly and confidently within a team it leaves less room for error. Lastly and most importantly, I have learned the importance of utilizing evidence based practice to aid me in developing practice related changes.

Amanda Lowe:

This research project will aid in my development and growth as a future nurse by emphasizing the importance of being educated about scope of practice and risk management, not only in the United States, but internationally, as well. Scope of practice is not something commonly discussed, but it is something that every healthcare worker needs to be informed on. This project has widened my understanding of scope of practice and risk management, and I hope to use this knowledge if I participate in global health medical work in the future. Not only is this a key concept to understand in one's home country, but it is also something one must have knowledge on before practicing abroad in order to prevent harm to oneself or to others. Utilizing

evidence in practice is one of the best ways to implement change where it is needed the most, and by doing so, can generate better outcomes for patients and for healthcare workers alike.

Lily Marrero:

Participation in this research project has and will continue to contribute to my development as a nurse in several ways. In our investigation of scope of practice, I had an in-depth look at not only my own scope of practice and those of my peers in the healthcare field, but at the devastating consequences that occur when one practices outside of scope. It is truly crucial to abide by scope of practice for the safety of our patients, and my newfound understanding of risk management has left me more determined than ever to ensure that both I and those around me are practicing as safely as possible for our patients. Additionally, I gained experience in researching, reading, and interpreting evidence-based practice guidelines. I have the resources to find and incorporate evidence-based practice into my nursing care for my patients, as well as ensuring that this care is delivered by the right care provider in the safest manner possible. Lastly, the truly collaborative nature of this project has been an exercise in teamwork. Coordinating the schedules, ideas, and work styles of eight individuals was challenging, but was possible through dedication and effective communication. The culmination of our work was a deliverable that we were proud to share with our stakeholders, and it was all the better because we were able to work as a team to create it.

Abby Peters:

After participating in this project and learning on a deeper level about risk management and scope of practice, I feel like I now have a strong foundation of knowledge about the subject to bring forward into my practice. While it was a sincere challenge to do most of this project

digitally, it forced me to learn to be adaptable, which is a characteristic that a new nurse definitely needs to have. Researching this topic and debating ideas and viewpoints with my group has allowed me to obtain a broad knowledge related to my profession of what is and what is not appropriate in practice. I was able to learn a lot of new policies and viewpoints regarding scope of practice that I know will guide me in my future practice. Working with a group this large digitally proved a challenge, and it has also allowed me to learn how to collaborate with different learning styles and work styles, which will be imperative when I begin working with different personalities and different types of nurses. It has helped me understand others' viewpoints and beliefs towards the same subject matter and learn how to become a team.

Emily Spengler:

Working on this capstone project has taught me many valuable lessons that can be carried into my future career as a nurse when working with other nurses alike and/or other members of the interdisciplinary health care team. The collaborative nature of this project effectively demonstrated the collaborative environment that I will soon be working in as an independent, autonomous member. It has taught me that paying attention to detail is an extremely crucial part of working in teams, to not only catch and correct mistakes of my own but also the mistakes of other members as well. Mistakes are going to be made whether it is in group projects or patient cases. The key is to not only to try to prevent these mistakes but also correct and mitigate the risks associated with any errors that arise.

Above all, it has proven to me that patience is a vital value and should be kept and maintained at all times while working with others. This project has also demonstrated that relying on others when I need help or get overwhelmed with the task at hand is necessary when

wanting to excel or achieve the highest level of success. The lessons that I have learned though this can be extremely useful when working with the many different members of the health care community, as well as working with patients and their loved ones. This capstone project has developed my communication, delegation, and leadership skills.

Appendix B

Surveys conducted regarding global health experience with Village Life Outreach Project:

Pre-Immersion Survey Questions

1. Please indicate your current field of work/study in the United States.

2. Did you participate in any pre-departure education in preparation for this experience?
If yes, please comment on what this entailed.

Yes No Comment: _____

3. Do you agree with this statement? "Scope of practice and/or ethical issues may occur while health professionals/students practice abroad."

Agree Disagree Unsure

4. How aware are you of the scope of practice for your own professional field of work/study?

Very Aware Somewhat Aware Not Aware

5. Is there a difference in the scope of practice for professionals of your particular field of work/study in the United States and in Tanzania?

Yes No Unsure

6. Are there differences in the scope of practice for students within your specialty as opposed to licensed professionals within your specialty?

Yes No Unsure

7. How likely do you think it is that you will encounter either a lapse in adherence to your own scope of practice or an ethical dilemma while abroad for this experience?

Very Likely Somewhat Likely Not Likely

8. How confident do you feel that you'll be able to stay within your professional scope of practice during this experience?

Very Confident Somewhat Confident Not Confident

Post-Immersion Survey Questions

1. Did you experience or witness any scope of practice issues while practicing abroad? If yes, what did the issue entail?

Yes No Comment: _____

2. Did you experience or witness any ethical dilemmas while practicing abroad? If yes, what did the issue entail?

Yes No Comment: _____

3. IF you participated in pre-departure education (PDE), how well did it prepare you for this experience?

Very Well Somewhat Well Not Well N/A (I did NOT participate in PDE)

4. If you did NOT participate in pre-departure education (PDE), do you feel that it would have been helpful?

Yes No Unsure N/A (I participated in PDE)

5. How confident do you feel that you maintained practice standards within the scope of practice outlined by your professional governing body during this experience?

Very Confident Somewhat Confident Not Confident

6. How much has your level of awareness related to your own professional scope of practice changed as a result of this experience?

Significantly Increased Slightly Increased Did not change/Decreased

7. Has your level of awareness about potential ethical implications of practicing abroad changed as a result of the experience? Please comment.

Yes No Comment: _____