

# Findings from a Three-Round Delphi Study: Essential Topics for Interprofessional Training on Complementary and Integrative Medicine

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## Supplementary file, Translated questionnaires

### 1st Delphi Round: Introduction

#### Delphi Study: Curriculum Development for Interprofessional Education on Complementary and Integrative Medicine

#### First Round

We welcome you to the first round of the Delphi survey

**"Development of an interprofessional curriculum on complementary and integrative medicine"**

Thank you very much for participating in this survey. When answering the questions, please refer to a potential seminar for **Complementary and Integrative Medicine (CIM)** with 30-60 teaching units of 45 min each, which is offered at a medical school for students of medicine and other healthcare professions (from the fields of nursing, therapy and diagnostics) in undergraduate education. This survey is meant to record your personal opinion on and assessment of contents and objectives for such a curriculum. Please fill in the questionnaire as completely as possible and use the free text to make comments and further additions. The survey will be conducted pseudonymously. Your evaluations and verbatim core statements from the free text answers will be included in the next survey round and in the result report, but it will not be possible to draw conclusions about your identity.

In addition to the socio-demographic surveys, the survey includes one section on the addressed goals and competencies and one section on the possible curricular content.

**It should take about 20 to 30 minutes to complete the questionnaire.**

You can stop and come back to continue the questionnaire at a later time. Your results will be stored temporarily.

If you have any questions, please do not hesitate to contact me.

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**NEXT**

## 1st Delphi Round: Socio-demographic Data (Part A)

How old are you?

Gender  
 female   
 male

To which profession group do you belong? (Multiple answers possible)

Nursing	<input style="width: 40px; height: 15px;" type="text"/>
Therapy	<input style="width: 40px; height: 15px;" type="text"/>
Medical technology/diagnostics	<input style="width: 40px; height: 15px;" type="text"/>
Medicine	<input style="width: 40px; height: 15px;" type="text"/>
Pharmacy	<input style="width: 40px; height: 15px;" type="text"/>
Social Work/Social Pedagogics	<input style="width: 40px; height: 15px;" type="text"/>
Sports Science	<input style="width: 40px; height: 15px;" type="text"/>
Educational Science	<input style="width: 40px; height: 15px;" type="text"/>
Midwifery	<input style="width: 40px; height: 15px;" type="text"/>
Psychology	<input style="width: 40px; height: 15px;" type="text"/>

Others

Which professional and/or academic degree do you have?

What additional qualifications do you have?

Current fields of activity (multiple answers possible)

Student	<input style="width: 40px; height: 15px;" type="text"/>
Inpatient care	<input style="width: 40px; height: 15px;" type="text"/>
Outpatient care	<input style="width: 40px; height: 15px;" type="text"/>
Rehabilitation	<input style="width: 40px; height: 15px;" type="text"/>
Prevention	<input style="width: 40px; height: 15px;" type="text"/>
Patient counseling	<input style="width: 40px; height: 15px;" type="text"/>
Oncology	<input style="width: 40px; height: 15px;" type="text"/>
Pediatrics/child care	<input style="width: 40px; height: 15px;" type="text"/>
Geriatrics/geriatric care	<input style="width: 40px; height: 15px;" type="text"/>
Palliative care	<input style="width: 40px; height: 15px;" type="text"/>
Teaching at the college, university	<input style="width: 40px; height: 15px;" type="text"/>
Apprenticeship at the university of applied sciences, vocational school	<input style="width: 40px; height: 15px;" type="text"/>
Research	<input style="width: 40px; height: 15px;" type="text"/>

Others

What is your current focus of activity?

In which country/state are you mainly working?

Baden-Württemberg	<input style="width: 40px; height: 15px;" type="text"/>
Bavaria	<input style="width: 40px; height: 15px;" type="text"/>
Berlin	<input style="width: 40px; height: 15px;" type="text"/>
Brandenburg	<input style="width: 40px; height: 15px;" type="text"/>
Bremen	<input style="width: 40px; height: 15px;" type="text"/>
Hamburg	<input style="width: 40px; height: 15px;" type="text"/>
Hesse	<input style="width: 40px; height: 15px;" type="text"/>
Mecklenburg-Western Pomerania	<input style="width: 40px; height: 15px;" type="text"/>
Lower Saxony	<input style="width: 40px; height: 15px;" type="text"/>
North Rhine-Westphalia	<input style="width: 40px; height: 15px;" type="text"/>
Rhineland-Palatinate	<input style="width: 40px; height: 15px;" type="text"/>
Saarland	<input style="width: 40px; height: 15px;" type="text"/>
Saxony	<input style="width: 40px; height: 15px;" type="text"/>
Saxony-Anhalt	<input style="width: 40px; height: 15px;" type="text"/>
Schleswig-Holstein	<input style="width: 40px; height: 15px;" type="text"/>
Thuringia	<input style="width: 40px; height: 15px;" type="text"/>
Austria	<input style="width: 40px; height: 15px;" type="text"/>
Switzerland	<input style="width: 40px; height: 15px;" type="text"/>

Other

Do you have a pedagogical qualification?

No	<input style="width: 40px; height: 15px;" type="text"/>
Medical-didactic training, pedagogical seminar < 10 teaching hours	<input style="width: 40px; height: 15px;" type="text"/>
Medical-didactic training, pedagogical seminar 10-99 teaching hours (e.g. lecturer training)	<input style="width: 40px; height: 15px;" type="text"/>
Medical-didactic training, pedagogical seminar > 100 teaching hours	<input style="width: 40px; height: 15px;" type="text"/>
Specific training / study (e.g. Master of Medical Education)	<input style="width: 40px; height: 15px;" type="text"/>

Others

Do you have experience in academic teaching? (multiple answers possible)

- No, no teaching experience at all
- No, teaching experience only in non-academic education
- Less than 15 lessons (á 45 min) per semester during the last year
- Performing 15 or more lessons (á 45 min) per semester in the last year
- Teaching experience for less than five years
- Teaching experience for five or more years
- Experience in interprofessional teaching
- Experience in teaching coordination
- Experience in curriculum development


What is your practical professional experience in the following areas of patient care? (including internships and periods of further training, multiple answers possible)

- Inpatient sector
- Outpatient sector
- Prevention
- Rehabilitation
- Palliative care
- Patient consultation

no experiene	< 3 years	3-8 years	> 8 years	no answer

What is your professional experience in the following research areas?

- Basic Research
- Clinical research
- Health Services Research
- Training research
- Further research areas

no experiene	< 3 years	3-8 years	> 8 years	no answer

How many years of professional experience do you have in total?

What is your basic attitude towards complementary medicine? Please rank yourself on the scale of 1-10 listed here.

very negativ											very positiv

If you use complementary medicine methods in a professional context, please indicate here the generic terms or the classification of the respective methods (e.g. phytotherapy, TCM, Ayurveda ...).

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## 1st Delphi Round: Competencies (Part B)

When answering the questions, please refer to a potential seminar for Complementary and Integrative Medicine (CIM) with 30-60 teaching units of 45 min each, which is offered at a medical school for students of medicine and other healthcare professions (from the fields of nursing, therapy and diagnostics) in undergraduate education.

Below you will find a list of teaching-learning objectives and competencies based on CIM curricula already described in the literature. Please rate them with regard to their relevance on a seven-point Likert scale. Please also indicate whether these competencies should be addressed explicitly or implicitly ("between the lines").

Use the free text to justify and supplement your assessment and to list further competencies.

Your comments will be listed anonymously in the next survey round. The assessed competencies will be assigned to four relevance groups based on the assessments.

### Teaching objectives and competencies (CIM = complementary and integrative medicine)

- B1.1 Students are able to classify CIM terms and methods correctly.
- B1.2 Students are able to form their own opinion about the respective procedures.
- B1.3 Students are able to reflect and explain their beliefs and attitudes towards CIM.
- B1.4 Students are able to expand their knowledge of CIM procedures.
- B1.5 Students are able to assess CIM methods with regard to their evidence on the basis of corresponding literature research.
- B1.6 Students are able to assess CIM methods with regard to their evidence on the basis of corresponding literature research.
- B1.7 Students are able to critically evaluate publications on CIM.
- B1.8 Students are able to independently apply selected methods to patient care.
- B1.9 Students are able to recognize their own possibilities and limitations in the interprofessional healthcare team.
  
- B1.10 Students are able to be familiar with the skills of all professions involved in CIM care.
- B1.11 Students are able to discuss CIM in the interprofessional healthcare team.
- B1.12 Students are able to recognize how their specific occupational roles contribute to provide the necessary patient care when working in interprofessional teams.
- B1.13 Students are able to respect different therapeutic perspectives and practices
- B1.14 Students are able to inquire and recognize the physical, psychological and social care needs of a patient.
- B1.15 Students are able to respect and consider patient perspectives and subjective experiences of illness.
- B1.16 Students are able to show openness to the wishes and attitudes of the patient and treat them respectfully.
- B1.17 Students are able to advise patients and relatives on CIM in an interprofessional team.
- B1.18 Students are able to handle their own health carefully with awareness.

1=not at all relevant	2	3	4	5	6	7=very relevant	How should the competencies be addressed?	
							rather explicitly	rather implicitly

1=not at all relevant	2	3	4	5	6	7=very relevant	rather explicit	rather implicit

Select up to three competencies from the following lists that seem most important to you

Drop-down-Menu: B1.1-B1.18

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (B1.1-B1.18).

Which other competencies do you consider relevant?  
The newly mentioned competencies will be submitted for evaluation into next survey round on a seven point likert scale.



### 1st Delphi Round: Curricular Content (Part D)

In the following, some teaching content are listed. Please assess their relevance for an interprofessional CIM curriculum on a seven-point Likert scale. In addition, you have the possibility to indicate if you cannot or do not want to assess the content due to lack of knowledge and/or for other reasons.

Please use the free-text fields to justify or supplement your assessments and to list further possible teaching content.

Your comments will be listed in the next survey round. The newly listed content will be submitted for evaluation in the second round of questioning. The assessed content will be assigned to four relevance groups (very relevant - not relevant). You will then have the opportunity to agree or disagree with the assignment and to add further comments.

- D1.1 Historical and philosophical backgrounds of CIM therapy
- D1.2 Clarification and explanation of CIM terms (natural medicine, complementary and alternative medicine, ...)
- D1.3 Legal issues relating to delegation, substitution and reserved activities for certain professions within CIM patient care
- D1.4 Use of CIM therapies
- D1.5 Supply structures and service providers (alternative practitioners, doctors with additional qualifications, health professions, CIM facilities)
- D1.6 Overview of CIM databases and literature search via the Internet
- D1.7 Deepening the assessment of CIM evidence on the basis of selected studies
- D1.8 Overview of effects and interactions of selected CIM therapies
- D1.9 Overview of methods in classical natural medicine (exercise, nutrition, hydrotherapy, herbalism and the balance of mind and body)
- D1.10 Overview of methods in non-classical natural medicine (e.g. Acupuncture, Homeopathy, Anthroposophical medicine)

1=not at all relevant	2	3	4	5	6	7=very relevant	I feel not competent to assess

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (D.1.1-D.1.10).

Here you can list further general content for an interprofessional CIM

#### Classical natural medicine

The classical natural medicine methods classified as relevant will be broken down in detail in the next survey round and submitted again for evaluation (80% > scale level 5).

- D2.1 Overview: Hydrotherapy (Bath, wraps, pourings)
- D2.2 Overview: Regulative therapy / Mind-Body medicine (Yoga, Tai chi, Qui gong, progressive muscle relaxation)
- D2.3 Overview: Movement therapy (Exercise training, walking)
- D2.4 Overview: Dietetics (nutritional recommendations, high-dose vitamins, trace elements)
- D2.5 Overview: Phytotherapy (medicinal plants, teas, aromatherapy, herbal medicines)

1=not at all relevant	2	3	4	5	6	7=very relevant	I feel not competent to assess

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (D.2.1-D.2.5).

#### Non-classical natural medicine

- D3.1 Neural therapy
- D3.2 Chiropractic
- D3.3 Cranio-sacral therapy
- D3.4 Homeopathy
- D3.5 Acupuncture
- D3.6 Traditional Chinese Medicine (TCM)
- D3.7 Anthroposophical medicine
- D3.8 Ayurveda
- D3.9 Tibetan medicine
- D3.10 Diverting procedures (leeches, cupping)

1=not at all relevant	2	3	4	5	6	7=very relevant	I feel not competent to assess

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the

Which other non-classical medicine methods do you consider relevant?

You have reached the end of the interview. Is there anything else you'd like to

**SUBMIT**

**Delphi Study: Curriculum Development for Interprofessional Education on Complementary and Integrative Medicine**

**Second Round**

**We welcome you to the second round of the Delphi survey  
"Development of an interprofessional curriculum on complementary and integrative medicine"**

Thank you very much for participating in the first survey round. The present questionnaire was designed on the basis of your weightings, suggestions and constructive criticism. All comments were fully incorporated into the second survey wave. A compilation of all quotations can be found in the attached result report.

Part A of this second survey contains questions on teaching methods, Part B: questions on competencies, Part C: questions on role competencies and Part D: questions on curricular content.

When answering the questions, please refer to a potential seminar for Complementary and Integrative Medicine (CIM) with 30-60 teaching units of 45 min each, which is offered at a medical school for students of medicine and other healthcare professions (from the fields of nursing, therapy and diagnostics) in undergraduate education.

This survey is meant to record your personal opinion on and assessment of contents and objectives for such a curriculum. Please fill in the questionnaire as completely as possible and use the free text to make comments and further additions. The survey will be conducted pseudonymously. Your evaluations and verbatim core statements from the free text answers will be included in the next survey round and in the result report, but it will not be possible to draw conclusions about your identity.

**It should take about 30 minutes to complete the questionnaire.**

You can stop and come back to continue the questionnaire at a later time. Your results will be stored temporarily.

If you have any questions, please do not hesitate to contact me.

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## 2nd Delphi Round: Teaching Methods (Part A)

In the first survey round, some methodological-didactic aspects for an interprofessional complementary and integrative medical curriculum were taken up. Since the development of a teaching and learning program cannot be carried out without taking teaching methods into consideration (assessment drives learning), your comments and suggestions from the first survey wave will be taken up and discussed at the beginning of this survey wave.

When answering the questions, please refer to a potential seminar for Complementary and Integrative Medicine (CIM) with 30-60 teaching units of 45 min each, which is offered at a medical school for students of medicine and other healthcare professions (from the fields of nursing, therapy and diagnostics) in undergraduate education.

From the following list, select the learning setting that you think is best suited for an interprofessional CIM seminar! (CIM=Complementary and integrative medicine)

Please choose one of the following answers!

CIM should be offered as a curricularly anchored elective module for all students in the medical and health professions.

CIM should be offered as a compulsory basic module for all students in the medical and health professions in the curriculum of the main study programme.

CIM basic knowledge should be offered as a compulsory module for all students in the medical and health professions. In addition, there should be the opportunity to deepen individual areas in elective modules.

CIM should be offered voluntarily, extracurricular modules with certificate degree.

CIM should not be offered as an independent interprofessional module but integrated more strongly into existing modules.

CIM should not be taught at universities and colleges.

  
  
  
  
  


Others

No answer

  


Select from the following list the structural orientation of the contents of an interprofessional CIM curriculum that best suits your needs.

Please choose one of the following answers!

CIM-contents should primarily be oriented on therapy options.

CIM-contents should primarily be oriented on disease patterns.

CIM-contents should primarily be oriented on reasons for seeking care.

CIM-contents should primarily be oriented on health care service processes.

CIM-contents should primarily be oriented on International Classification of Functioning, Disability and Health (ICF).

  
  
  
  


Others

No answer

  


Please select from the following list for which fields of activity an interprofessional CIM seminar should primarily qualify.

If you think the statement is correct, please tick the box on the left.

If the statement is only partially true or under certain conditions, you can write a comment on the right.

Interprofessional CIM care is relevant for the acute inpatient sector.

Interprofessional CIM care is relevant for the chronic-rehabilitative area.

Interprofessional CIM care is relevant for the outpatient sector.

Interprofessional CIM care is relevant to the field of prevention and health promotion.

Interprofessional CIM care is relevant for the support of self- and lay therapy and care.

Interprofessional CIM care cannot be implemented in the (present and future) care reality and is therefore not relevant.

I agree	Free-text field
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Others

Please select from the following list which teaching methods should be primarily used in a CIM curriculum.

If you think the statement is correct, please tick the box on the left.

If the statement is only partially true or under certain conditions, you can write a comment on the right.

CIM content/knowledge should be presented in a structured way in the classical lecture format.

CIM content should be presented as complex case studies (case-oriented learning).

CIM knowledge should be acquired by self-directed learning (problem-oriented learning).

Students should discuss ethical questions and contradictory statements regarding CIM.

Students should share their own experiences, opinions and attitudes with regard to CIM.

Students should try out simple procedures and CIM methods for themselves (experience-oriented learning).

Real patients and/or acting patients should be involved in the seminars as often as possible.

I agree	Free-text field
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

Others

**NEXT**









- D3.7 Regulative therapy / Mind-Body medicine: Mindfulness and meditation
- D3.8 Regulative therapy / Mind-Body medicine: Digital forms of relaxation (My headspace for sleep therapy)
- D3.9 Movement therapy: Exercise and endurance training
- D3.10 Movement therapy: Dance and music therapy
- D3.11 Movement therapy: Fascia therapy
- D3.12 Dietetics: General nutritional recommendations (Nutrient supply, vitamins and trace elements)
- D3.13 Dietetics: Diet for special wishes (Mediterranean, vegan, low-carb, ...)
- D3.14 Dietetics: Nutrition for food intolerances and allergies
- D3.15 Dietetics: High-dose vitamins (orthomolecular therapy)
- D3.16 Dietetics: Fasting (healing fasting, interval fasting)
- D3.17 Phytotherapy: Medicinal plants, tea, tinctures
- D3.18 Phytotherapy: Aromatherapy, embrocation


Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (D.3.1-D.3.18).

In the survey sound, the non-classical natural medicine methods were classified as partly relevant or not relevant, although in some cases the exemplary integration was desired. Please indicate below to what extent you agree with the statements made here. Click on the left-hand box if you fully agree with the statement. In the right box you can write a comment if you only partially agree with the statement or if you have further comments.

Non-classical natural medicine is understood here to be all those traditional procedures that have either been well researched or proven by experiential healing knowledge.

Clearly distinguishable from this are paramedical procedures. These do not have a corresponding tradition and thus no correspondingly extensive experience.

- D4.1 As many non-classical naturopathic treatments as possible should be discussed so that the students get a good overview.
- D4.2 Non-classical naturopathic therapies for which a scientifically proven efficacy is available should be the main topic.
- D4.3 The non-classical naturopathic therapies often desired by patients should primarily be discussed.
- D4.4 The non-classical naturopathic therapies that are frequently offered locally and discussed in public should be addressed primarily.
- D4.5 When discussing non-classical naturopathic treatments, the topic of acupuncture must be covered.
- D4.6 When discussing non-classical naturopathic treatments, the choice of lecturers should be made carefully in order to enable an objective and scientific approach.
- D4.7 Paramedical procedures should also be addressed in order to sensitise students to shalatanery.

1=not at all relevant	2	3	4	5	6	7=very relevant	If feel not competent to assess

**Non-classical natural medicine**

The following non-classical natural healing methods were suggested in the first survey round as possible additional content (in addition to acupuncture, homeopathy, Ayurveda, etc.). In the following, these procedures are now broken down.

- D5.1 Osteopathy
- D5.2 Classical massages
- D5.3 Shiatsu (Manual therapy method, application of pressure and friction to certain areas of skin)
- D5.4 Tai Chi (origin in the martial arts, today rather meditatively performed)

1=not at all relevant	2	3	4	5	6	7=very relevant	If feel not competent to assess

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (D.5.1-D.5.4).

**Paramedical procedures**

The following paramedical procedures were suggested as possible content in the first survey round. These procedures are now broken down in the following.

- D6.1 (Foot zone) reflex therapy
- D6.2 Hildegard medicine
- D6.3 Iris diagnostics
- D6.4 Bach flowers
- D6.5 Schuessler salts (homeopathically administered mineral salts)
- D6.6 Kinesiology
- D6.7 Reiki (Energy work, technique of laying on of hands)
- D6.8 Color therapy

1=not at all relevant	2	3	4	5	6	7=very relevant	If feel not competent to assess

Here you can justify the assessments you have made and/or list which aspects of the listed content you consider particularly important. Please indicate the corresponding number (D.6.1-D.6.8).

You have reached the end of the interview. Is there anything else you'd like to share?

**SUBMIT**

**Delphi Study: Curriculum Development for Interprofessional Education on  
Complementary and Integrative Medicine**

**Third Round**

**We welcome you to the third round of the Delphi survey  
"Development of an interprofessional curriculum on complementary and integrative  
medicine"**

Thank you very much for participating in the first and second survey rounds!

This third survey round is somewhat shorter and will take up a few open questions. It is very important that you work through this survey completely, because at the end you will have the opportunity to provide some personal information on how you would like to be further involved. The survey is divided into four short parts: Part A: General questions, B: Questions about treatment reasons and disease patterns, Part C: Questions about role competencies, Part D: Personal data and feedback.

**It should take about 10 to 20 minutes to complete the questionnaire.**

You can stop and come back to continue the questionnaire at a later time. Your results will be stored temporarily.

If you have any questions, please do not hesitate to contact me.

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**NEXT**

### 3rd Delphi Round: General Questions (Part A)

In the following, you will be presented with some questions that pick up critical discussion points from the first two survey rounds. When answering the questions, please refer to a potential seminar for Complementary and Integrative Medicine (CIM) with 30-60 teaching units of 45 min each, which is offered at a medical school for students of medicine and other healthcare professions (from the fields of nursing, therapy and diagnostics) in undergraduate education.

In your opinion, what are the greatest barriers and/or challenges when offering an interprofessional CIM seminar at a medical school?

In your opinion, what are the greatest benefits and/or opportunities when offering an interprofessional CIM seminar at a medical school?

In the first two survey rounds it was noted, among other things, that it may be difficult to recruit lecturers with the appropriate technical and professional background for teaching at CIM. It would, however, be possible to offer individual CIM topics as e-learning units. Please indicate to what extent you agree with the following statements!

E-learning units are particularly suitable for presenting theoretical background information on CIM concepts and therapy methods.  
 E-learning units are particularly suitable for presenting case-based scenarios for individual treatment causes in a CIM seminar.  
 E-learning units are particularly suitable for presenting different professional perspectives on a CIM topic.  
 E-learning units should not be integrated in an interprofessional CIM seminar.  
 When integrating e-learning units into a CIM seminar, care must be taken to ensure that there is sufficient attendance time available for the exchange between students.  
 An interprofessional CIM seminar could be completely covered by e-learning units.

I completely agree	I rather agree	I partly agree	I rather disagree	I disagree at all

What other barriers and benefits do you see in offering e-learning units in an interprofessional CIM seminar?

Here you have the opportunity to comment or supplement your statement on e-learning units in a CIM seminar.

The integration of practical exercises of CIM procedures and methods was discussed in the first two rounds of the survey and several times requested. On the other hand, it was noted that this only makes sense if they are also used later in everyday professional life.

Please comment on the following statements!

Hands-on experience should be integrated into a CIM seminar so that students can experience and assess the effect of the methods themselves.  
 Hands-on experience should be integrated into a CIM seminar so that students can assess the feasibility/workability of the respective method.  
 Hands-on experience should be integrated into a CIM seminar so that students can better understand and comprehend the respective therapeutic concept.  
 Hands-on experience should be integrated into a CIM seminar so that students acquire the ability to apply the methods in professional practice.  
 Hands-on experience should not be integrated into a CIM seminar.

I completely agree	I rather agree	I partly agree	I rather disagree	I disagree at all

Here you have the opportunity to comment or supplement your statement on the acquisition of communicative competencies in a CIM seminar.

Please name in the following simple therapy methods which you think are particularly suitable to be taken up in a CIM curriculum.

On the one hand, the promotion of communicative competencies was seen as central to an interprofessional CIM seminar, on the other hand, the risk was mentioned that, if a focus is set in this area, the contents will become too blurred with other contents in the curriculum.

Please comment on the following statements!

The acquisition of communicative skills should be the main focus of an interprofessional CIM seminar from the very beginning.  
 Students should first be given an overview of CIM before the acquisition of communicative competencies is given priority.  
 The acquisition of communicative skills should not be given priority in a CIM seminar, as otherwise there is a risk that other content will be neglected.

I completely agree	I rather agree	I partly agree	I rather disagree	I disagree at all

Here you have the opportunity to comment on your statement on communicative competencies.

**NEXT**







### 3rd Delphi Round: Personal Data, Feedback (Part D)

Finally, you have the opportunity to indicate whether and in what form you would like to be involved in the publication of the results and further development of the curriculum. Furthermore, you have the opportunity to evaluate the survey process.

The data collected in the three survey waves will be evaluated and published by the working group of General Medicine and Health Services Research at the University of Heidelberg. Please indicate whether and in what form you would like to participate, be named and/or informed!

I would like to be informed about corresponding publications.  
I am willing to actively participate in publications as co-author.  
My name (first and last name) may be mentioned in the acknowledgements of publications.  
However, no connections may be made between individual statements or results concerning my person or corresponding conclusions may be drawn.

Yes	No	No answer
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Here you can add further comments on the topic "Publications" and/or describe in which form you can or want to get involved!

A curriculum consists not only of competencies and content, but also of a coherent concept that also integrates teaching methods. The development of such a concrete curriculum goes beyond the scope of a written survey. However, the results of this survey can be used as a basis for the development of a concrete curriculum.  
work on the further development of the curriculum. Travel and accommodation costs will be covered, but a fee cannot be paid.

I am willing to take part in the workshop (one day)  
Independent of the participation/non-participation in the mentioned workshop, I will gladly be available for further questions and discussions regarding the further development of an interprofessional CIM curriculum.

Yes	No	No answer
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have the following remarks, suggestions and wishes for the workshop or for further cooperation.

With the following two questions at the end of the survey I would like to find out how you generally got along with the Delphi survey.

At this point you can name difficulties and improvement wishes as well as perceived bias of the survey process!

At this point you can name successful and positive aspects of the survey process!

Thank you very much for completing the questionnaire! Is there anything else you would like to share?

**MANY THANKS FOR YOUR COMMITMENT!**

**SUBMIT**