Teaching and Evaluating Clear Communication Skills:

Assessment of a Curriculum in Health Literacy and Clear Communication Skills Through an Objective Structured Clinical Encounter

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Background



Health and Medicine Division of the National Academy of Sciences recommend health literacy skills training in 2004.

In a 2010 survey of US allopathic medical schools:

- Response rate 47%
- 72% had required health literacy curricula
 - 84% used didactics/lectures
 - 57% used standardized patients
 - 46% included workshops/role-play
 - 57% utilized an OSCE for an evaluative tool



Background



- Health literacy curricula in medical schools positively impact knowledge, confidence and use of health literacy skills
- Limited data on long-term retention of skills
- Limited studies in the literature <u>comparing</u> type of <u>curricula</u> on these skills



Hypothesis



We hypothesized that despite its popularity as a teaching method, didactic instruction is an inferior method for teaching health literacy and clear communication skills



Objectives of Project



Primary Objective:

 Determine if a workshop in health literacy and clear communication skills will increase rates of use of clear communication skills in an OSCE scenario

Secondary Objectives:

 Determine if a workshop in health literacy and clear communication skills will lead to increased knowledge, comfort and use of these skills



Methods



- Study Design
 - Prospective comparative cohort study
- Inclusion Criteria
 - Third Year Pediatric Clerkship students at Albert Einstein College of Medicine, 2015-2016
- Data Analysis
 - Bivariate analysis: t-test, chi-square
 - Regression analysis: Linear, Binomial logistic





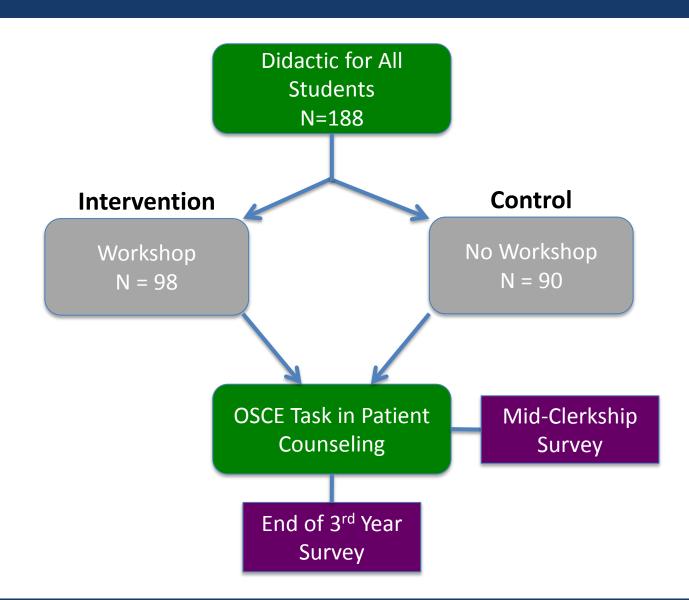
TIMING

Clerkship Orientation

Early Clerkship

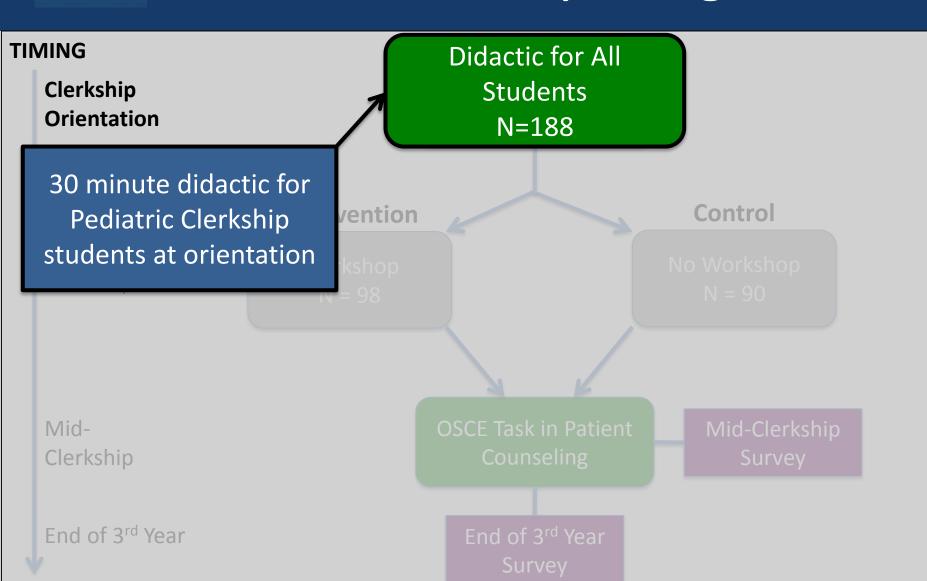
Mid-Clerkship

End of 3rd Year



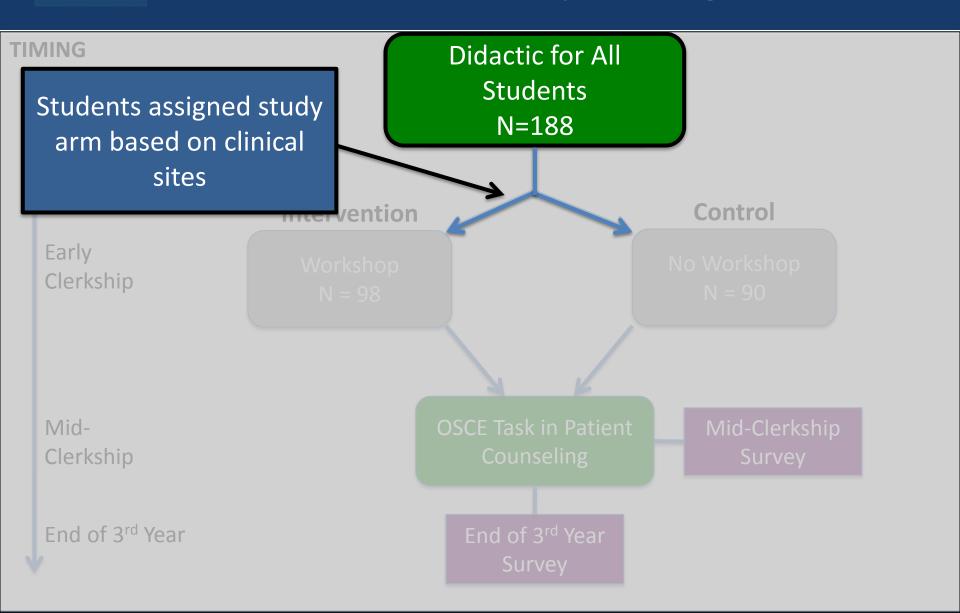
















TIMING

Clerkship Orientation

Early Clerkship

Mid-Clerkship

End of 3rd Year

Didactic for All
Students
N=188

Intervention

Workshop N = 98

OSCE Task in Patie Counseling

> End of 3rd Year Survey

Ninety minute workshop

Group feedback of a taped mock clinical encounter

Role-plays with group feedback of skills

Pocket card of all 4 primary clear communication skills





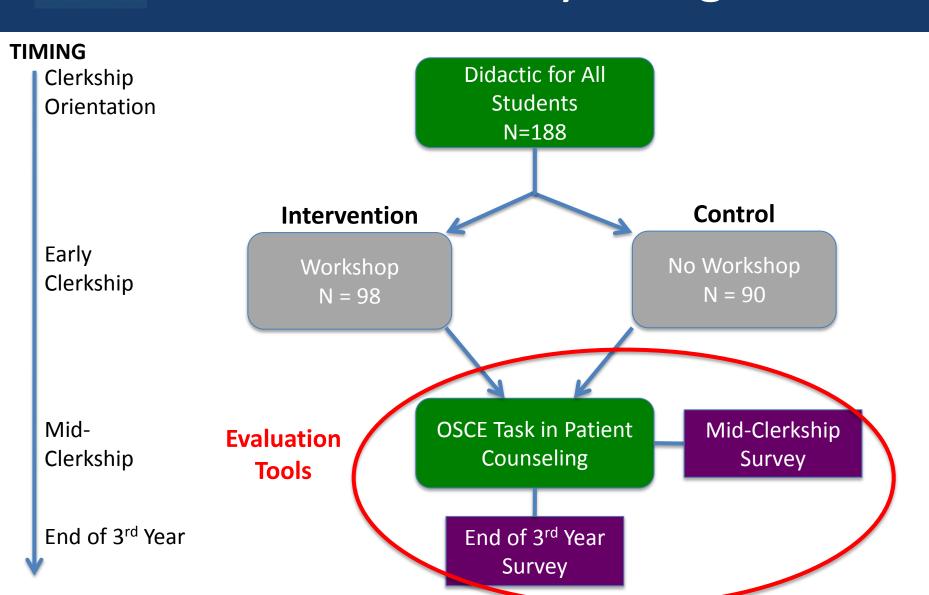
CTEP for Clear Communication

You Can Teach Every Patient!

- C = Clear and simple language. No medical jargon.
- T = Teach back technique. Ask patient to repeat your instructions back to you in their own words.
- E = Effectively encourage patient's questions. Act like you want to hear their questions! Say "What questions do you have?" NOT "Do you have any questions?"
- P = Pictures. Use pictures or graphics whenever possible when giving patient instructions.











TIMING

Clerkship

Counseling a standardized patient about fever and anti-pyretic use

Didactic for All Students N=188

Control

No Workshop

Mid-Clerkship

End of 3rd Year

OSCE Task in Patient Counseling

Mid-Clerkship Survev

End of 3rd Year Survey





IMING

The examinee elicited the following:

	Fever Counseling Items*	Yes	No		
1.	Did the student explain things in plain, non-medical language as they were counseling about fever? Check "No" if any unexplained medical jargon or vague terms were used and not defined.				
2.	Did the student use graphics or drawings to help teach?				
3.	Did the student check to make sure that you understood their instructions?				
	If YES, did they use: [] Teach-back method (Asked you to repeat their instructions back to them in				

your own words.)

[] Open ended (e.g., "Tell me what you don't understand about these

[] Closed ended (e.g., "Do you understand?" "Does that make sense?")

4. Did the student ask you if you had any questions?

If YES, did they use:

[] Open ended (e.g., "What questions do you have?")

[] Closed ended (e.g., "Do you have any questions? "Does that make sense?")

Standardized Patient Checklist

Adapted from a checklist used in the literature.

All standardized patients were given same training in the document.

Control

End of 3rd Year

OSCE Task in Patient Counseling

^{*} Ref: Adapted from: Green JA et al. Addressing health literacy through clear health communication: A training program for internal medicine residents. Patient Education and Counseling 95 (2014) 76-82





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	unexplained medical jargon or vague terms were used and not		
	defined.		
2.	Did the student use graphics or drawings to help teach?		

- 3. Did the student check to make sure that you understood their instructions?
 - If YES, did they use:
 - [] Teach-back method (Asked you to repeat their instructions back to them in your own words.)
 - [] Open ended (e.g., "Tell me what you don't understand about these instructions.")
 - [] Closed ended (e.g., "Do you understand?" "Does that make sense?")
- 4. Did the student ask you if you had any questions?
 - If YES, did they use:
 - [] Open ended (e.g., "What questions do you have?")
 - [] Closed ended (e.g., "Do you have any questions? "Does that make sense?")

Clear Language

Use of Pictures

Teach-back

Effectively soliciting patient's questions

Control

No Workshop

Mid-Clerkship Survey

Students scored and classified as:

Score 0-2 = "Low-performers"

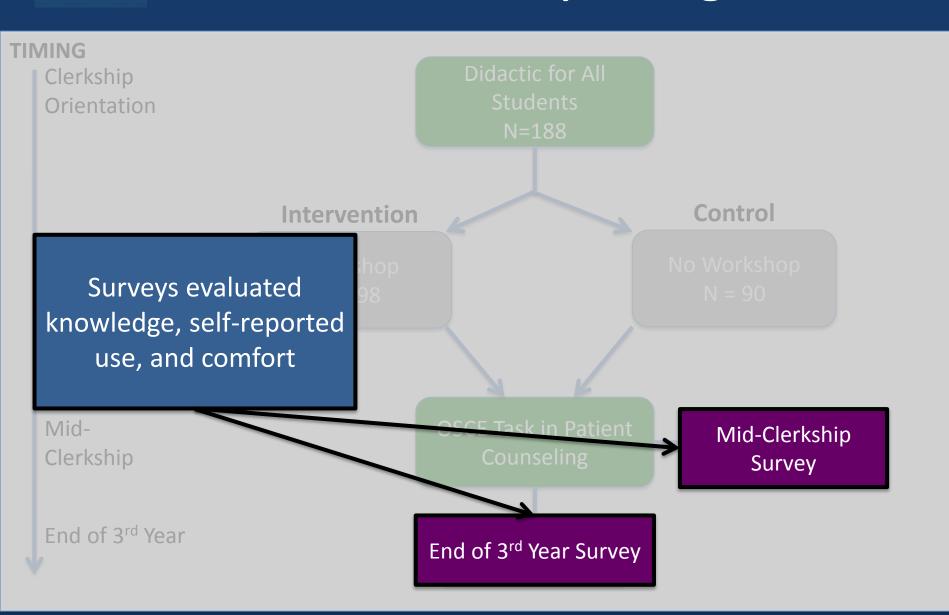
Score 3-4 = "High-performers"

OSCE Task in Patient Counseling

Ref: Adapted from: Green JA et al. Addressing health literacy through clear health communication: A training program for internal medicine residents. Patient Education and Counseling 95 (2014) 76–82







Results

OSCE Standardized Patient Checklist: Results



Bivariate Comparison of Communication Skills Between Groups



	Didactic	Didactic + Workshop	P-Value
High CTEP Performance (3-4)	8.9%	37.4%	<0.01
Low CTEP Performance (0-2)	91.1%	62.6%	<0.01
Clear Language Use	84.4%	88.1%	0.38
Teach-back Use	26.7%	52.5%	<0.01
Asked for Questions	92.2%	77.8%	<0.01
Open-ended elicitation for questions	14.5%	25.0%	0.13
Use of Pictures	10%	45.5%	<0.01



Adjusted Logistic Regression of Communication Skills Between Groups



		95% C.I.		
	Odds Ratio	Lower	Upper	P-value
CTEP Low vs High Performer	6.4	2.8	14.8	<0.01
Teach-back Use	3.2	1.7	6.1	<0.01
Asked for Questions	0.4	0.1	0.7	<0.01
Open Ended Questions	2.1	0.9	4.7	0.08
Use of Pictures	8.2	3.6	18.5	<0.01

Mid-Clerkship and End of Year Survey: Results



Mid-Clerkship Survey



Bivariate Comparison of Knowledge, Comfort and Use

N=80	Didactic Workshop + Didactic		P-value
Number of Skills Recalled	0.4	2.4	<0.01
Difference in retrospective pre/post comfort using (1-5)	0.7	1.4	<0.01
Proportion who used CTEP in the clerkship	63.9%	95.5%	<0.01



Mid-Clerkship Survey



Adjusted Logistic Regression of Use During the Clerkship

		95% C.I.		
	OR	Lower	Upper	P-value
Use during the clerkship	13.1	2.0	87.3	<0.01



End of Year Survey



Bivariate Comparison of Reported CTEP Use in Third Year

N=85	Didactic	Workshop + Didactic	P-value
Use of CTEP >5 times in entire year	33.3%	57.5%	0.04
Use of CTEP >10 times in entire year	18.2%	29.3%	0.23



End of Year Survey



Logistic Regression of Reported CTEP Use in Third Year

		95% C.I.		
	Odds ratio	Lower	Upper	P-value
Use >5 times during entire year	2.3	0.9	5.7	0.08



Results: Summary



- Workshop students were significantly more likely to use <u>teach-back</u> and <u>pictures</u> in the OSCE
- Workshop students were less likely to ask the SP for questions, although if they did ask for questions they had a statistically insignificant trend toward greater use of open-ended questions



Conclusions



- Workshop students:
 - Improved in measures of knowledge, comfort and use compared to didactic alone students
 - Had some evidence of higher rates of selfreported use of the CTEP skills throughout the entire 3rd year, though not at levels that indicate consistent integration into practice



Limitations



- Not randomized
- Single institution, generalizablility
- Possible selection bias in end of year survey
- No way to know for certain if improvements were due to teaching method or greater length of time exposed to material



Conclusions



- A workshop supplementing didactic instruction in health literacy skills can improve student performance on an OSCE task in clear communication
- Didactic instruction alone is an insufficient method for teaching health literacy and clear communication skills



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Questions?