ADOPTING AN INTEGRATIVE APPROACH WHEN TEACHING “ADVANCED COMMUNICATION”

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Background Studies have shown that graduating medical students consistently feel poorly prepared to communicate in difficult clinical situations and at the end of life. These discussions should not be seen in isolation from other communication. We are concerned that specifically teaching advanced communication should not be seen in isolation from other communication strands and decision making in undergraduate teaching.

Methods The project involved a new communication programme, integrating previously separate strands to deliver four half-day sessions for fifth year medical students. The students were given an “Advanced Communication Skills handbook” covering the key areas of:

- Sensitive discussions (breaking bad news)
- Decision discussions (risk and escalation)
- Challenging discussions (strong emotions and errors)

The programme used role-play and was delivered by several different disciplines to symbolically emphasise integration.

Results The students scored their ability (out of 10) to discuss the key areas listed above prior to the first session and after the final session. The results showed an increase in perceived skill level for each key area and written feedback about the sessions was very positive.

Breaking bad news: 5.3 to 7.8
Shared decision-making: 6.1 to 7.8
DNACPR discussions: 4.0 to 7.4

Conclusion The feedback for these sessions, in conjunction with the increase in perceived skill level across the key areas suggests that this is an effective way of integrating communication strands and decision making in undergraduate teaching.

REFERENCE