SERIOUS NEWS: OSCE ASSESSMENT OF STUDENTS’ PALLIATIVE CARE COMMUNICATION SKILLS

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Background

- The number of people living with serious illness is increasing1
- All clinicians caring for the seriously ill should have competence in “primary” palliative care skills1,2
- Undergraduate palliative care education is highly variable3 and leaves students & residents feeling unprepared4
- The Massachusetts Coalition for Serious Illness Care aims to improve clinician education in serious illness communication

Objectives

- Develop and pilot a palliative care OSCE case for final year medical students to assess serious illness conversation skills
- Determine the correlation between students’ performance in history-taking skills and overall communication, and their ability to address various aspects of serious illness conversations

Methods

- Created an end-of-life case & 26-item performance checklist
- Performance on history-taking was judged by trained faculty; performance on overall communication was judged by trained standardized patients (SPs)
- Cohort scores on the 10 serious illness items (grouped as one variable) were compared to history-taking scores and overall communication scores
- Pearson’s correlation used to analyze relationships between these communication variables

Results

Table 1: Mean score and standard deviation on serious illness items compared to other aspects of history-taking data collection.

<table>
<thead>
<tr>
<th>Serious Illness Items</th>
<th>Mean score (%)</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>General introduction</td>
<td>68.91</td>
<td>29.103</td>
</tr>
<tr>
<td>History of present illness</td>
<td>89.34</td>
<td>16.046</td>
</tr>
<tr>
<td>Review of systems</td>
<td>41.62</td>
<td>24.068</td>
</tr>
<tr>
<td>Past medical history</td>
<td>83.22</td>
<td>28.065</td>
</tr>
<tr>
<td>Family history</td>
<td>14.47</td>
<td>35.184</td>
</tr>
<tr>
<td>Social history/habits</td>
<td>48.87</td>
<td>29.568</td>
</tr>
</tbody>
</table>

Figure 1: Serious illness conversation items score distribution. One hundred sixty-six Harvard medical students’ scores were compiled. Average score on the 10 serious illness item group was 69% (SD=16.6).

Correlations:

- No significant correlation between students’ performance on the serious illness items and history-taking scores (r = 0.042; p = 0.592)
- A weak, positive correlation between students’ performance on the serious illness items and overall communication scores as rated by SPs (r = 0.156; p = 0.045)
- Overall performance did not correlate with serious illness item performance: better performing students did not score more highly on serious illness items

Discussion

- OSCE checklist items stem from new shared MA Coalition competencies involving:
  - Exploring illness understanding, concerns, goals, values
  - Exploring and responding to emotion
  - Exploring pain and symptom burden
  - Understanding philosophy/role of the patient

- Why isn’t there a correlation between serious illness item performance and overall communication performance?
- Why is there a correlation between serious illness item performance and general history-taking performance?
- Some general communication skills (asking open-ended questions, exploring patient perspectives/concerns, expressing empathy, etc.) are applicable when discussing serious illness and end-of-life care

References