Experiential Learning Improves Medical Students' Confidence in Delivering Difficult News

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Background

- Delivering difficult news is a skill used by all clinicians, yet most receive little or no formal training in how to do it
- For patients, ineffective communication can increase emotional distress, decrease illness understanding, interfere with treatment adherence, decrease satisfaction
- For clinicians, ineffective communication can decrease satisfaction and contribute to burnout
- **Small group teaching that incorporates experiential learning methods can improve self-efficacy and skills**

Methods

- We adapted a workshop for delivering difficult news for students on their Medicine Clerkship (*MedEdPORTAL.* 2006;2:175)

- SPIKES model used internationally for teaching these skills

- Students attended an interactive large group session, followed by skills practice with simulated patients in small groups (n = 6) led by trained fellow and faculty facilitators

- Each group worked through 6 clinical scenarios and learners received real-time peer and facilitator feedback

SPIKES

- Setting - adequate time; create privacy

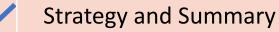- Patient's Perception – start with patient's understanding

- Invitation for Information - is patient ready to hear news; how much do they want to know

- Knowledge – what is your message; how to deliver message (warning shot, chunk & check)

- Explore Emotions and Empathize

- Strategy and Summary

Retrospective Pre- Post- Design

After the session, students were asked to provide before/after self-assessment ratings (Likert scale, 1-5) in response to the following prompts:

- How well PREPARED do you consider yourself for delivering difficult news?

- How would you ASSESS your own SKILLS in delivering difficult news?

- Rate your CONFIDENCE in the following SKILLS:
  - Opening the conversation
  - Assessing patient or family member's understanding of medical situation
  - Responding to patient's or family's emotions
  - Discussing discontinuation of curative or life-prolonging treatments

Results

- 165 third-year medical students were trained over 5 workshops throughout the year
- 120 students completed the post-session Qualtrics evaluation
- 79% of students rated the training as "Quite" or "Very" Useful

Pre- and Post- Course Ratings (N = 120)

Outcome	Pre Mean (SD)	Post Mean (SD)
Preparation*	2.33 (0.87)	3.46 (0.87)
Skills*	2.57 (0.8)	3.39 (0.78)
Confidence*	2.6 (0.77)	3.46 (0.73)

* Indicates a significant difference (using Bonferroni correction) between the pre- and post-course measures

Student Comments

The small groups were really great, the best training we've had all year! They were well thought out and very well executed

The fact that the cases were so challenging and the actors were so well prepared made the session feel very realistic and this was great practice!

The most helpful piece was knowing that this was a training, and that I could "time- out" and collect my thoughts and debrief, if needed.

The session forced me to actively engage and puts you in an uncomfortable position forcing you to practice the skills we learned

Loved the debriefing and getting to practice. The standardized patients were amazing.

Conclusions

- We successfully implemented an educational module on *Delivering Difficult News* to 3rd year medical students during their Medicine Clerkship.
- After the session, students:
  - Felt **more prepared** with **improved overall skills** for delivering difficult news
  - Had **increased confidence** in specific conversation elements
- Challenges and next steps:
  - Building a sustainable small group facilitator pool
  - Ensuring integration in the new curriculum

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If you only remember one thing from this presentation it could be that...

Delivering difficult news is an advanced communication skill and, like all skills, can be learned.

Mastery requires deliberate practice and feedback.