Undergraduate Communication Skills
Training in breaking bad news: benefits of individual supervision

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CST in oncology: European consensus meeting

- CST required at all levels of education
- Should allow active participation / interactivity
- Learner - centered courses

Stiefel F et al, *Annals of Oncology* 2010
Rationale for undergraduate training in BBN

Opportunity to develop important competences:

- dealing with complex medical information

- dealing with high emotional load (patient and physician)

Yedidia MJ et al, *JAMA* 2003
Moore PM et al, *Cochrane Database Syst Rev* 2013
Aims

To evaluate whether a specific undergraduate communication skills training program with individual supervision

1. Improves medical students’ skills in BBN

2. Enhances skills in BBN as compared to standard small group teaching
Design

Master 1 students $N=239$

- **intervention group** (54% female) $N=97$
  - IT
  - sup

- **comparison group** (59% female) $N=140$
  - SGS

video 1 [T1] → IT → sup → video 2 [T2] → IT → sup → video 3 [T3] → OUTCOME

**within-group comparison**

OUTCOME

between-group comparison

IT: individual training
SGS: small group session/supervision
sup: supervision
setting
Measures

1. Specific Checklist of Teaching Objectives
2. Roter Interaction Analysis System (RIAS)
3. Student’s Nonverbal Behavior
4. Student-rated instruments
Individual training at the undergraduate level to promote competence in breaking bad news in oncology

Alexandre Berney | Valérie Carrard | Marianne Schmid Mast | Raphael Bonvin | Friedrich Stiefel | Céline Bourquin
## Pre/post comparison (IG)

<table>
<thead>
<tr>
<th></th>
<th>Baseline (N=97)</th>
<th>Post-Training (N=97)</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Global rating (1 - 5)</strong></td>
<td>3.03 .93</td>
<td>3.67 .96</td>
<td>&lt; .001</td>
</tr>
<tr>
<td><strong>Scores of Process Skills</strong></td>
<td>14.88 4.95</td>
<td>23.56 4.97</td>
<td>&lt; .001</td>
</tr>
</tbody>
</table>

Berney A. et al, *Psycho-Oncology* 2017
### Between group comparison

<table>
<thead>
<tr>
<th></th>
<th>Int. GP ((N=97))</th>
<th>Control GP ((N=140))</th>
<th>(p)</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>(M) (SD)</td>
<td>(M) (SD)</td>
<td></td>
</tr>
<tr>
<td>Global rating ((1 - 5))</td>
<td>3.67 .96</td>
<td>3.05 .88</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>Scores of Process Skills</td>
<td>23.56 4.97</td>
<td>19.99 5.06</td>
<td>&lt;.001</td>
</tr>
</tbody>
</table>

Berney A. et al, *Psycho-Oncology* 2017
Table 1 Linear regression models predicting post-training performance of the students in the intervention group from increases (between pre- (T1) and post-training (T3)) in verbal and nonverbal behavior

<table>
<thead>
<tr>
<th>variables</th>
<th>overall impression</th>
<th>process skills</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>SE</td>
</tr>
<tr>
<td>increase in verbal interaction behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social talk</td>
<td>-0.37*</td>
<td>0.15</td>
</tr>
<tr>
<td>Positive talk</td>
<td>0.05*</td>
<td>0.02</td>
</tr>
<tr>
<td>Negative talk</td>
<td>0.03</td>
<td>0.10</td>
</tr>
<tr>
<td>Emotional responsiveness</td>
<td>0.02</td>
<td>0.02</td>
</tr>
<tr>
<td>Partnership building</td>
<td>0.06*</td>
<td>0.03</td>
</tr>
<tr>
<td>Orientation</td>
<td>0.03</td>
<td>0.08</td>
</tr>
<tr>
<td>Open questions</td>
<td>0.01</td>
<td>0.03</td>
</tr>
<tr>
<td>Closed questions</td>
<td>-0.08</td>
<td>0.05</td>
</tr>
<tr>
<td>Biomedical info</td>
<td>0.04</td>
<td>0.03</td>
</tr>
<tr>
<td>Psychosocial info</td>
<td>0.06*</td>
<td>0.03</td>
</tr>
<tr>
<td>Biomedical counseling</td>
<td>0.05</td>
<td>0.05</td>
</tr>
<tr>
<td>Psychosocial counseling</td>
<td>0.02</td>
<td>0.03</td>
</tr>
<tr>
<td>F</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>increase in student positive nonverbal behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F</td>
<td></td>
<td></td>
</tr>
<tr>
<td>R2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\[^*p < .10. ^{**}p < .05. ^{***}p < .01. ^{****}p < .001. N = 96\]

Note. Students’ gender and year of cohort have been entered as covariates in the 2 regression models
Conclusion I

- Results show a clear impact of the training on students’ competence in BBN
- Results favor an individual approach tailored to the needs of the student
Supervision qualitative aspects

Review

Supervision in psychiatry: *terra incognita*?

Joanna MacDonald and Pete M. Ellis
Main objectives of the supervision

- Address both technical and relational issues
- Be student-centered / explore specific needs
- Promote existing competences (student self-critical!)
Main objectives of the supervision

- Gaining awareness of one’s own reaction
- Explore student lived experience
- Make accessible less conscious aspects of the clinical relationship
Main ingredients of the supervision

- Skills
- Support
- Reflexivity
- Student-centered
- Examples
Typical issues discussed in the supervision

- Space for the patient
- Process / Temporality
- Confusion between the needs of the patient and those of the student
Typical issues discussed in the supervision

- Difficulty to address the limits of medicine (resulting in false/premature reassurance)
- Need for immediate repair / solution
- Telling all the truth to the patient
- Context (prof, family)
Conclusion II

- Individual supervision provides *key teachable moments* and make it possible for the student to learn to meet with the patient ....as well as him/herself
Thank you!