


DO YOU HEAR WHAT I HEAR?

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ABSTRACT: Poster (1A)

- Purpose:** The research for best practices in health literacy indicate that there are several key techniques to help increase patient understanding, which is linked with increased adherence to treatment plans and better health outcomes. These key techniques include: avoiding the use of medical jargon; using the 'teach back' method to assess patient understanding; summarizing need-to-know or need-to-do information in 3 points or less; and consistently speaking clearly, slowly, and with an appropriate volume during patient interactions (Coleman, 2013). With these recommendations in mind, the purpose of this study was to determine if medical students are inherently using the some of the skills recommended to improve understanding when communicating with patients.
- Methods:** This research involved an exploratory descriptive approach based on evaluation forms completed by Standardized Patients (SPs) after each history-taking encounter with medical students in the Undergraduate Medical Studies Communication Skills Course (CSC). The form consisted of four questions related to the students' use of the four key techniques related to improving communication and understanding between physician and patient. Data was collected for a period of five months: September–November and January. In addition, following the completion of the CSC, the medical students were surveyed to examine their self-reported use of the same key techniques and their confidence levels in using those techniques.
- Results:** Results indicate that the percentage of observed students using medical jargon during their interviews with SPs was minimal to non-existent. The chi square analysis ($p= 0.732$) indicated no significant relationship between the month of response and the use of medical jargon while interviewing standardized patients. However, there was some variability in the use of 'teach back' throughout the course. The percentage of observed students using this technique was 33.3% (September), 50% (October), 32.4% (November), and up again to 41.5% (January). Chi square analysis indicated no significant difference at the $p<.05$ level ($p=.709$) between the time periods during which SPs rated the use of this communication technique. In terms of providing a 3-point summary, in September 58.3% of the students evaluated were reported to have used this technique, 63.3% in October, and the percentage jumped to 83.3 and 83% respectively in November and January. The chi square analysis did suggest there was a significant relationship between the use of the 3-step summarizing technique and progression through the communications course with $p<.05$ ($p=.034$). Finally, the percentage of observed students using clarity, appropriate volume and speed while interviewing the SPs was 100% for September and October, and dropped just slightly for November and January to slightly over 98%. The chi square analysis of this communication technique over the course of the study ($p= 0.894$).



Conclusion: The results indicate that the technique to speak clearly, with appropriate volume and speed, is one in which the first year medical students in this study were proficient from the start of their communication course. Based on the data collected the same could be said for the technique to avoid the use of medical jargon during communications with patients. However, this technique deserves further study with students who are further along in their medical studies, and therefore more familiar with medical concepts. Results do not clearly indicate that students are regularly using the techniques of 'teach back' and the 3-point summary. Students also have lower self-reported confidence in effectively using these two techniques. This data suggests that it may be useful to include explicit instruction in these techniques within the first year communication course to increase students' frequency of use and confidence levels with using these techniques. The inclusion of confidence questions in the survey was based on the fact that these are communication techniques are not explicitly taught within the CSC, but they are felt to be directly linked to effective communication with future patients. If students do not feel confident in their ability to identify low-literacy patients, they are less likely to feel they have the skills to effectively communicate with them, therefore increasing the difficulty in bridging the gap in communication between patients and healthcare providers. This could be an area for future curriculum enhancements.