

Abstracts Short Communications «Words»

Development of communication skills

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Background:

Communication is a core competence for nurses. Therefore, the curriculum in the Bachelor of Science in Nursing at Bern University of Applied Sciences (CH) is focused on the development of competences around communicative skills. Students practice intensively during the communication modules, particularly in communication training utilising standardised patients. However, it is unknown how effective this training is for students and how well their competences are developed.

Research question:

How do former Bachelor of Science in Nursing students from the Bern University of Applied Sciences experience the development of their communicative skills in relation to the other knowledge acquired during their studies, and how do the skills developed in the course relate to communication skills acquired in their current practice?

Method:

Six qualitative episodic interviews were conducted with former students. Analysis was based upon interpretative phenomenological analysis.

Results:

During their studies, the participants reflected on their first training in communication utilising standardised patients. They reported that they became sensitised with this training, that it increased their knowledge and experience, and that they felt more confident about their communication skills. After graduation, role security and self-assertion were dominant within the interprofessional context. In their current nursing practice, they experienced a further development of their analytical ability in relation to self-reflection and the perception of their environment. Another change experienced was the implicit use of communicative skills. The basis for their professional development was their personality, the bachelor programme, and the communication training within the programme.

Discussion:

Former students experienced and reflected upon several learning phases. These phases activated different aspects of their long-term memory. The communication modules were experienced as being effective over the long-term, due to the emotional components within the communication training. The important role of communication trainers was also mentioned. Participants reported that the feedback they received was enormously beneficial and it contributed to long-term retention of the training. This is because the situation becomes more tangible and concrete when the approaches are reflected upon. It can be assumed that the participants are, due to the communication-skills training, more capable of acting in future communicatively difficult situations. Additionally, the combination of theoretical aspects of communication, and communication training including reflection, shaped the development of communicative competences and their long-term retention.

Conclusion:

The graduates entered into practice with a wealth of knowledge and initial experience. However, the transition between university and practice could be improved upon, especially for new graduate nurses. This study provides evidence that nurses use and reflect upon professional communication in everyday care. How the competences are applied in practice cannot be clearly evaluated. In order to close this research gap, observations in the workplace are necessary.

Teaching clinical skills with Simulated Patients Instructors (SPI)

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Background:

In 2018, the Medical School of Lausanne took the decision to abandon the organization of an OSCE for 2nd-year students of Bachelor. This was due to the important resources needed to set up such an exam for 240 students who had no clinical experience. At that point of their medical curriculum, they only had 2 formative encounters with SP's on history taking and 6 sessions in which they could practice physical examination in between students. This led to deceiving performances at the OSCE, as students mainly seemed to ask questions and perform physical examination learned by heart, with no clinical integration. In order to assess the physical exam competencies taught in 2nd year Bachelor, we decided to substitute formative encounters with Simulated Patients Instructors (SPI) for 2nd-year of Bachelor OSCE. We focused our intervention on 3 major domains of physical examination: neurological, cardiopulmonary and abdominal exam.

Project description:

Patients were selected and instructed in each of the 3 domains: 12 men for the neurological examination, 12 women for the cardio-pulmonary examination and 12 women for abdominal examination.

Based on the students' physical examination checklist, they were taught to understand the purpose of each action or gesture and feel when it was done properly. They were also instructed on how to correct the student (gesture, posture, attitude, formulation of demands).

At the same time, they learned how to address critical subjects such as how to ask a woman to take off her bra in order to perform the cardiac examination, for example.

For their part, students had a theoretic ex-cathedra lecture on the topic, followed by a training session where they could practice on each other with the help of a tutor ("tutor for skills", student of 2nd year of Master).

The formative encounter with the SPI took part after the in-between-student training session. Students were divided in small groups (3-4 student) and spent one hour with the SPI. An expert teacher was present during the session and went from room to room, in order to answer any question and check the accuracy of the SPI training.

Outcome or expected outcome:

This formative encounter is expected to give students the opportunity to learn and practice clinical examination in a safe environment. It's an opportunity to enhance their clinical skills and their confidence. They can perform a clinical examination for the first time on a patient who is able to give feedback on each gesture and help them address critical issues.

SPI can feel if the examination is done properly (if palpating is deep or not, if the strength testing is adapted...) and check that all the students have the opportunity to make the same test and repeat it until everyone can perform it in a correct way.

Challenges:

In this new type of encounter, we are facing different challenges:

Teaching SPs to become qualified SPIs, acknowledged by teachers and students

Teaching students to acquire new skills, taught by several instructors (professors, faculty, more advanced students, SPIs), and accepting the fact that they are different ways to perform an examination, which is something they find very disturbing.

Addressing critical issues and enhancing communication skills, in order to prevent any interference in the examination due to embarrassment or discomfort.

Discussion:

In our setting, during 2nd year Bachelor, opportunities to practice physical examination on real persons were limited to students themselves or SPs. Up to now, we stucked to the option of students practicing on themselves under the supervision of more advanced students. This option was suboptimal as groups of 15 students for one tutor did not allow for easy individual interaction and feedback by the tutor. The

tutor being a student himself can lead to an overly relaxed atmosphere that is not suitable to achieve learning objectives. Lack of resources didn't allow us to have a faculty in every room during the whole activity.

SPIs allow students to practice physical examination on a patient in a more formal setting, with an individual feedback on his/her performance. The formative encounter with the SPI is a preliminary clinical experience useful for future interaction with real patients.

Students are thankful of the opportunity to practice physical examination on a SPI and address topics such as of how to ask a female patient to take her bra off in order to make the cardiac auscultation in a simulated setting.

SPIs enjoy their new role, which empowers them and allows them to feel part of the learning process.

The faculties are collaborative as far as instructing the SPIs and participating to the project.

Some reluctance comes from the student's tutors, who feel a kind of competition with SPIs and think they are more knowledgeable about physical examination than SPIs. We have to explain that the SPI encounter is a complementary activity that brings the perspective of the patient in the interaction.

Is an additional assessment of candidates by standardized patients useful in the OSCE?

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Background:

Good physician communication skills seem to increase patient satisfaction and improve healing processes. Although there are indications that physicians and patients value communicative competencies differently, candidates in OSCE are often evaluated by physicians only.

Research Question:

In this study, we examine whether additional assessment of candidates by standardized patients (SPs) is useful.

Methods:

In the OSCE of the 5th year of study 2017 in Bern, the students were additionally assessed by the SPs on the basis of two items. The SPs were informed in advance that their assessment will be obtained for academic research only and will have no impact on the official assessment of the students. One item addressed the communicative competencies of the students: "Global communication rating" on the scale "Extremely competent; Very competent; Competent; borderline; Not competent". The other item addressed the SPs' loyalty to the candidates: "I would like to come back and discuss my concerns with this student." on the scale "Fully agree; Agree; I rather agree; Neutral; I don't agree". In addition, the SPs had the opportunity to comment on their rating in a free-text field.

Results:

In fact, the SPs rate the communicative competencies of the candidates differently than the medical examiners. Had 30% of the candidates' assessment of the candidates by the SPs been included, three times more candidates failed in the section "Anamnesis Status Management" (10 versus 3, respectively 4.2% versus 1.3%). In addition, the consideration of the SP judgment reduced the construct irrelevant variance by one fifth (in the "Anamnesis Status Management" section from 21.4 % to 17.3 % and in the area "Communicative Competencies" from 39.0 % to 31.0 %). This means that the measurement error is reduced, and the ratings better match the actual performance of the candidates.

The two assessments by the SPs (communication and loyalty) are closely linked ($r = 0.739$). The SPs mentioned among other things the interpersonal relationship with the candidates, the flow of information and the professionalism of the candidates as important aspects for their evaluation.

Discussion and Conclusion:

The results of our study argue for an additional assessment of the candidates by the SPs. However, before such an assessment is actually included in the official assessment of the candidates, we believe that it should be further explored in what the assessments by the SPs and by the medical examiners differ and who can better assess which aspects.

A history of success: facing the challenges of a bilingual standardized patient program in medical education

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In Switzerland, the official languages are four and medical school is either German or French speaking. Geographically Fribourg is situated on the border between the two languages. The medical school of the University of Fribourg has chosen to provide its curriculum in both languages: French and German. The aim of this article is to describe the process of developing its bilingual standardized patient (SP) program. The University of Fribourg offers now a Bachelor's degree in human medicine for 120 students. Because of the admissions' process policies throughout Switzerland, the majority of students studying medicine in Fribourg are native German-speaking, with only one-third of French-speaking students. The teaching of clinical skills has been using the standardized patient (SP) program as a didactic tool since 2010. Over the years and as the number of students has increased, we have perceived a linguistic issue concerning SPs and real patients in the hospital. In fact, the Fribourg population reflects its clinical reality, with almost 70% of the French-speaking population. Students face two difficulties: first, they are faced to a patient and they have to integrate the anamnesis and the communication skills within their learning process, second, they also have to struggle with a foreign language (French) to effectively communicate with the patient. This can result in a cognitive overload for the learners and a source of frustration for both learners and patients, hindering their relationship during the conversation.

For the evaluation of clinical skills in the form of Objective Structured Clinical Examination (OSCE), the students have the possibility of choosing their own language (French or German) for the exams. This means finding enough German-speaking SPs to cover the different OSCE stations. In order to answer these issues concerning the teaching of clinical skills and the examination, we adopted multiple approaches. First, we decided to develop our SP program with the primary objective of recruiting and training mainly German-speaking SPs. We were able to build up a pool of German-speaking and bilingual SPs over the years, thanks to the help of bilingual SPs already involved in our program and to the contacts with other German-speaking health training centers. Second, we translated all clinical situations and most, of course, materials in both languages. Third, we have encouraged the presence of bilingual tutors during the courses of clinical competencies.

To show the benefits of our approach we have been collecting data on the students who have completed their Bachelor of Human Medicine training in Fribourg since 2009 and their linguistic choice: French, German, bilingual. We have also gathered the information regarding the number of SPs used for the third year of the Bachelor of Medicine (BMed3) clinical skills seminars and the number of SPs who have participated in OSCEs, including the language spoken, since 2010. 840 students have been participating since 2009 in the different clinical skills learning activities of the BMed3 program: 67% spoke German, 29% French and 4% were bilingual. 1739 SPs have been recruited for the clinical skills to date. As shown in Fig.1 we had no German-speaking SPs in 2009. In 2019 we were able to count on the participation of 122 German-speaking SPs (41%) and 77 bilingual (26%) to cover all the learning activities. As described in our project, it is remarkable that from 2014, the recruitment of German-speaking SPs has become very efficient and we have seen significant progress. In the academic year 2016-2017, we had the highest number of students (115 students) and this corresponds to the highest number of German-speaking SPs interventions. Regarding the OSCE, as the number of stations requiring SPs varies from year to year, we have also seen an increase in German-speaking SPs since 2015. We can say that starting from 2012; we were able to guarantee German-speaking students SP services in their own language. As shown by the description of the process and the data presented we could face the challenge of creating a standardized patient program in French and German and to meet the changing needs of our learners. This process has taken almost ten years and it needs a constant and reiterative work of maintenance and development to adapt to the continuous changing of our students' population. Networking and collaboration with other universities and training institutions in the field of care have been central elements to facilitate the success of this project as well as the enthusiasm and the efforts of our dedicated faculty members. Now we have sufficient resources to offer clinical skills training in both French and German at the Bachelor

level and we will use these precious experiences to combine our students' needs with the language competences of our SPs for the upcoming Master of Medicine Program that will begin September 2019.

The use of Medical Onomatopoeia during SP Encounters

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Introduction:

Onomatopoeia is a term that comprehensively refers to "mimetic word." Onomatopoeia is the process of creating a word that phonetically imitates, resembles, or suggests the sound that it describes. Examples of Onomatopoeia in English include "cuckoo," "sizzle," "hiccup," or "buzz". Although a particular sound is heard similarly, by people of different cultures, it is often expressed through the use of different consonant strings in different languages.

In Asian countries, Onomatopoeia are often used to express an impression in a personal, emotional manner, and therefore considered indispensable not only conversation.

In this project, a sub-group of ASPE International Committee investigates, if Onomatopoeia, which allows to express an impression in a personal, emotional manner, exists also in other countries and cultures. As there are many different Onomatopoeia expressions in Asian countries, we focused in our investigation on the Onomatopoeia of pain.

Method:

As the members of ASPE's international committee come from different continents as Asia, Africa and Europe, the Onomatopoeia of describing pain in different countries were investigated.

Each member of the sub-group explored in his/her own cultural environment, by doing literature search and conducting interviews, if Onomatopoeia exists to express pain in their context.

Results:

Onomatopoeia to express pain from different countries as Japan, Singapore, Togo and German and English speaking countries were found. In some countries as e.g. Japan, pain is expressed using many kinds of Onomatopoeia, in other countries one could find only one. The Onomatopoeia from the different countries were listed in form of a little dictionary.

Discussion/Conclusion:

Medical Onomatopoeia can describe not only the quality of pain but also the degree of pain.

Understanding and interpreting Onomatopoeia by patients who use Onomatopoeia is important for healthcare providers so they can understand patients and give the right treatment.

In a time where people migrate from one continent to another it is important for healthcare professionals to interpret and understand people's concerns. Encounters between SP and student are a good opportunities to practice those skills.