

Upcoming Events

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for the next 3 months

Communication Skills & Delivering Bad News

Effective communication skills are vital for faculty in the numerous roles that we hold on a daily basis. Communication skills play a critical role in the development of patient relationships, the education of our learners, and the conveyance of information during patient care. Today's healthcare provider must provide patient-focused care that embeds compassionate and clear communication to help build trust and rapport. Additionally, faculty are responsible for instilling interpersonal skills among their learners through role modeling and guidance.

Good communication should recognize the individuality of each person and explore different views and perspectives. Utilizing effective communication skills can enhance trust through honesty and transparency. Additionally, good communication should recognize the individual needs of the patients and/or learners to help enhance understanding. As faculty, it is our role to both advise on and facilitate encounters that demonstrate good communication skills.

The importance of communication skills as an important aspect of healthcare provider training is well recognized. But how do we know what good communication looks like? Below is a diagram from the Education Daily that outlines some of the core domains of effective communication skills for medicine to help guide us as we consider the effectiveness of our communication.



<https://theeducationdaily.com/2021/10/communication-in-medical>

While there may be many things that help us to recognize what effective communication looks like, there are still several barriers to implementing these during encounters with patients and learners. Time constraints, cultural/language barriers, power differentials, self-fear, lack of support, and personality differences may all impact the effectiveness of the communication that occurs.¹ Identifying these challenges allows faculty and learners to practice their communication skills in relevant contexts and strive for improvement.² Additionally, using techniques to gain attention, provide clear explanations, and assess understanding can improve communication skills to ultimately enhance patient education.³

Communication can become even more challenging when bad news is involved. While it may be something that healthcare providers encounter regularly within a practice, faculty are often not formally trained to provide or teach the essential communication of delivering bad news.⁴ Breaking bad news is stressful and often avoided or performed inadequately because of the cognitive, behavioral, or emotional deficits created for the person receiving the bad news.⁴ However, we know that communication skills can be taught and developed through didactic lectures, small group discussions, practical experiences, and teaching moments during clinical care.⁴ In an upcoming offering as part of the OCPD Current Topics in Healthcare series, Dr. Neil Prose (Duke University), will be discussing specific tools for cultivating empathic curiosity and communicating with patients and families in challenging situations. This session, "Difficult Conversations with Patients: A Practical Approach to Empathic Communication," will help to enhance communication skills while offering practical strategies and statements that can be applied in situations where delivering bad news is necessary. So please join us for one of the two-session offerings – March 8, 2022, from 7:00 am – 8:00 am or March 9, 2022, from 12:00 pm – 1:00 pm to learn more.

-*Mariah Rudd, MEd (Director of Office of Continuing Professional Development)*

References:

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- Hong, J., Nguyen, T. V., & Prose, N. S. (2013). Compassionate care: Enhancing physician-patient communication and education in dermatology: Part II: Patient education. *Journal of the American Academy of Dermatology*, 68(3), 364-e1.
- Alelwani, S. M., & Ahmed, Y. A. (2014). Medical training for communication of bad news: a literature review. *Journal of education and health promotion*, 3.

"The single biggest problem in communication is the illusion that it has taken place." - George Bernard Shaw

Dean's Corner

As we begin a new year, we will shift our Dean's Corner focus to delve deeper into the new Health Systems Science and Interprofessional Practice (HSSIP) domain and the exciting work being done to build its curriculum and provide faculty development to optimally deliver the new material. Over the last 18 months, the Virginia Tech Carilion School of Medicine (VTCSOM) has embarked on developing and implementing this innovative new curriculum, building on the foundational work of the traditional interprofessionalism domain. The curriculum expands upon interprofessional education and practice to explore the myriad of factors that influence how health care professionals can work within health care systems to provide excellent clinical care, and to create a greater understanding of how health care systems function. The overarching goal for the HSSIP domain is to help VTCSOM's medical students understand the interrelationships among complex elements of health care delivery to provide optimal patient care and become leaders in their fields.

"Systems thinking is a discipline for seeing wholes. It is a framework for seeing interrelationships rather than things, for seeing 'patterns of change' rather than 'static snapshots.'" - Peter Senge

The priorities for the HSSIP launch include both delivering core content to medical students and creating a strong faculty development program. To do this, VTCSOM has engaged a team of individuals including Dr. Cynthia Morrow as lead for the Phase 1 curriculum (for first- and second-year medical students); Dr. Natalie Karp as the lead for the Phase 2 curriculum (for third- and fourth-year medical students); Dr. Sarah Parker, Chair of Health Systems and Implementation Science; as well as a team from the Office of Continuing Professional Development (OCPD) for ongoing faculty development through our unique Clinical Champions program.

The Clinical Champions are faculty members selected from each core clerkship to serve as the HSSIP "champion" for their department. These Champions are currently participating in a year-long faculty development initiative that will engage them with curated HSSIP content spanning all domains contained within the HSS framework, as well as foundational curriculum development workshops to support their continued growth as educators. Under the guidance of Dr. Karp, they are working to develop HSSIP didactic sessions for the M3 clerkships for the upcoming academic year.

In the M1/M2 preclinical years, medical students are introduced to HSSIP through interactive didactics as well as small group discussion sessions. In the first year, students from VTCSOM are joined by students from Radford University Carilion's Accelerated Bachelor of Science in Nursing and the Physician Assistant programs. The two-year curriculum addresses each core element of health systems science including, but not limited to, systems thinking, interprofessional teamwork, social determinants of health, ethics, clinical informatics, and health policy. One of the great strengths of the pre-clinical program is that the Clinical Champions serve as small group facilitators for the M1/2 curriculum to provide faculty continuity throughout the HSSIP curriculum. In addition to the classroom-based experiences, second-year medical students have experiential sessions, called "Boots on the Ground," in which they spend time in community-based settings to see population health leadership and change agency in action. Applying what they have learned in class and in the community sessions, students work in small groups to develop and present their own proposals for community health improvement.

In the M3/M4 years, students are exposed to the health care delivery system daily through their normal clinical work. The didactic sessions developed by the Clinical Champions will expand upon the foundational HSSIP knowledge gained in the M1 and M2 years. Three clerkships have launched pilot HSSIP didactics this year: OBGYN, Family Medicine, and Surgery. The feedback from the students thus far has been overwhelmingly positive as they focus on health equity (OBGYN), quality and patient safety (Surgery) and value in health care (Family Medicine). Additional focused teaching on HSS principles will occur through Systems Sessions (formerly Domain Days), which are half-day sessions during which the entire M3 class comes together for deeper learning. This year, students will have new sessions on Health Equity and Leadership. Sessions that existed previously, such as an upcoming End-of-Life Care session, are being revitalized with HSSIP core concepts at the forefront.

Across all four years, through a focus on interrelationships between all parts of the system, rather than just a focus on constituent parts, we will continue to strive to develop systems citizens who have the knowledge and skills to care for the communities they serve and optimize the health care delivery system.

In the coming months, the Dean's Corner will be used to introduce you to the HSSIP clinical champions who are serving as change agents and thought leaders within our healthcare system in ways that facilitate the creative, forward-moving progress that makes systemic change and subsequent growth possible. We look forward to transparently sharing our successes, our collective areas for growth, and what we have learned along the way.

-*Sarah Parker, PhD (Chair - Health Systems & Implementation Science)*

-*Cynthia Morrow, MD, MPH (Co-leader - Phase 1, Health Systems Science & Interprofessional Practice)*

-*Natalie Karp, MD (Co-leader - Phase 2, Health Systems Science & Interprofessional Practice)*

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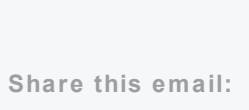
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