Perception of medical graduates and resource persons about communication skills training programme in a tertiary care hospital

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ABSTRACT

Background: Several studies, as well as licensing bodies, have found that poor communication skill is the most frequent underlying cause of complaints against physicians and malpractice allegations. **Objectives:** The objectives of the study were to know the perception of the interns as well as the faculty about the communication Skills Training Programme. **Methodology:** The workshop was conducted to train the interns in communication skills. To know the effect of sensitization program; feedback, of the students and the faculty members as the assessors, was taken after the completion of the posting. **Results:** Most of the students and faculty agreed on the feasibility of the workshop and appreciated its contribution in medical education. In spite of the known challenges, it was found to be a great approach to ensure it as a part of the curriculum. **Conclusions:** The perception of the interns as well as the faculty was found to be favorable in all aspects of the introduction of communication Skills Training Programme.

Key words: Communication skill workshop, Curriculum, Medical interns

he physicians usually report the dire necessity of knowledge about the adequate doctor-patient communication but having difficulty applying those communication skills in their actual workplace [1–4]. Medical educators are increasingly taking account of the shift from biomedical to bio-psychosocial care and, more recently, from patient-centered to relationship-centered care [5-9], yet the postgraduate communication skills training is still deficient in structure and continuity [10,11]. Patients also complain about the doctors' lack of the involvement and inadequate provision of information [12–17].

Although it is taken for granted that history taking and communication skills are learnable [18,19], there is a paucity of valid and reliable studies that have directly measured and demonstrated learning progress on the basis of a proper design [20,21]. This study is a step toward the incorporation of communication skills in the medical curriculum.

MATERIALS AND METHODS

This study was conducted in a tertiary care teaching institution over a period of 1 year including the duration of data collection of 3 months. The permission of the Institutional Ethical Committee was taken. The informed consent of interns who participated in the study was also obtained. The study subjects were the interns who were posted in the department of community medicine in a medical institution in that tenure of internship, i.e. 3 batches, about 35 interns. There were 8 faculty members.

Faculty members, who underwent basic training in communication skills as a part of basic course workshop and Attitude and Communication Module in medical curriculum (ATCOM) in medical education technologies, were included in the study. They were sensitized and oriented for the workshop for training the interns using the validated MCI module on ATCOM sensitization. The same faculty members, being a part of the medical education unit, assessed individually all interns on patients. We have taken the average of their assessment to avoid bias. To know the effect of sensitization program, a feedback from the students and the faculty members as the assessors was taken, after the completion of the posting, to avoid any kind of bias.

RESULTS

The organization of the workshop was appropriate as far as the venue and rooms were concerned. As far as the appropriateness of time allocation, resourcefulness of the speakers, trustworthiness of the communication skills information, workshop material was adequate, and the module was helpful. The relevance of the content of the workshop, its clear aims and objectives, and well-defined goals help to understand the subject and all the participants agreed that they were given constructive feedback on their performance. Majority of them found it fun-filled and interesting, facilitating teamwork. They found that the workshop was helpful in improving the ability to communicate with the patients helping

Table 1: Perception of the students regarding the training program (n=35)

| Table 1: Perception of the students regarding the training program (n=35) | 1 (0/) | 2 (0/) | 2 (0/) | 4 (0/) | 5 (0/) |
|---|--------|--------|--------|--------|---------------|
| Questions Part A. Washalan and tad questions | 1 (%) | 2 (%) | 3 (%) | 4 (%) | 5 (%) |
| Part A: Workshop related questions | 22.0 | 0.6 | 20.6 | 27.1 | 2.0 |
| I am not bothered to turn up to sessions on communication skills | 22.9 | 8.6 | 28.6 | 37.1 | 2.9 |
| Venue of workshop convenient | 0 | 5.7 | 14.3 | 48.6 | 31.4 |
| The teaching room well equipped and comfortable | 0 | 5.7 | 20.0 | 51.4 | 22.9 |
| Duration of the workshop appropriate | 0 | 5.7 | 31.4 | 48.6 | 14.3 |
| Time allocation appropriate for each speaker | 0 | 2.9 | 20 | 62.9 | 14.3 |
| Speakers were resourceful | 5.7 | 2.9 | 14.3 | 45.7 | 31.4 |
| I find it difficult to trust information about communication skills given to me | 31.4 | 37.1 | 8.6 | 22.9 | 0 |
| Workshop material adequate and the module helpful | 2.9 | 5.7 | 28.6 | 48.6 | 14.3 |
| The workshop clear in its aims and outcomes and its goals were well-defined | 0 | 0 | 22.9 | 40.0 | 37.1 |
| The content of the workshop appropriate for my level of understanding | 0 | 0 | 17.1 | 48.6 | 34.3 |
| Content of the workshop relevant to my practice | 0 | 2.9 | 22.9 | 60.0 | 14.3 |
| Workshop provided hands on activities | 0 | 0 | 17.1 | 51.4 | 31.4 |
| The workshop helped me to understand the subject | 0 | 0 | 20.0 | 62.9 | 17.1 |
| I had plenty of opportunity to practice communication skills | 2.9 | 8.6 | 25.7 | 40.0 | 22.9 |
| I gave constructive feedback on my performance | 0 | 0 | 22.9 | 62.9 | 14.3 |
| Part B: Questions related to the communication skills | | | | | |
| I find it difficult to take communication skills learning seriously | 42.9 | 22.9 | 17.1 | 14.3 | 2.9 |
| I find it hard to admit to having some problems with my communication skills | 5.7 | 40.0 | 22.9 | 31.4 | 0 |
| Learning communication skills are fun and interesting | 0 | 8.6 | 20.0 | 42.9 | 28.6 |
| Learning communication skills are too easy | 2.9 | 5.7 | 37.1 | 37.1 | 17.1 |
| Learning communication skills will help facilitate team-working skills | 2.9 | 5.7 | 14.3 | 51.4 | 25.7 |
| Learning communication skills will improve the ability to communicate with patients | 0 | 2.9 | 8.6 | 51.4 | 37.1 |
| Learning communication skills or will help me to respect patients | 0 | 2.9 | 5.7 | 60.0 | 31.4 |
| Learning communication skills or will help me to respect my colleagues | 0 | 2.9 | 14.3 | 54.3 | 28.6 |
| I do not need good communication skills to be a teacher or a good clinician | 68.6 | 20.0 | 2.9 | 2.9 | 5.7 |
| Communication skills teaching would have a better image if it sounded more like a science subject | 17.1 | 11.4 | 31.4 | 28.6 | 11.4 |
| I think it's really useful learning communication skills on the education degree | 2.9 | 2.9 | 22.9 | 51.4 | 20.0 |
| My ability to pass exams will get me through education school rather than my ability to communicate | 8.6 | 25.7 | 31.4 | 25.7 | 8.6 |
| Learning communication skills are important as my ability to communicate is a lifelong skill | 2.9 | 2.9 | 17.1 | 45.7 | 31.4 |
| Communication skills learning should be left to psychology students, not education | 37.1 | 37.1 | 5.7 | 14.3 | 5.7 |
| Communication skills training should be mandatory | 2.9 | 17.1 | 14.3 | 37.1 | 28.6 |
| Section B: Questions related to the faculty | | | | | |
| The faculty happy to answer my questions | 0 | 0 | 5.7 | 74.3 | 20.0 |
| The faculty's explanations were clear and unambiguous | 0 | 5.7 | 11.4 | 51.4 | 31.4 |
| The faculty encouraged my contributions to the workshop | 0 | 0 | 11.4 | 65.7 | 22.9 |
| The faculty asked appropriate questions to stimulate thinking | 0 | 2.9 | 20.0 | 48.6 | 28.6 |
| The faculty friendly and approachable | 0 | 5.7 | 11.4 | 42.9 | 40.0 |
| The Faculty sensitive to my difficulties | 5.7 | 2.9 | 28.6 | 45.7 | 17.1 |
| 1 - Strongly disagree 2 - Disagree to some extent 3 - Neutral 4 - Agree to some extent 5 - Strongly agree | J.1 | ۷.۶ | 20.0 | TJ.1 | 1/.1 |

1 - Strongly disagree, 2 - Disagree to some extent, 3 - Neutral, 4 - Agree to some extent, 5 - Strongly agree

to develop respect for patients as well as colleagues. They felt the need of communication skills to be a teacher or a good clinician and that communication skills teaching would have a better image if it sounded like a science subject. They also felt that learning communication on the educational degree is useful which is a lifelong skill and so should be mandatory as shown in Table 1.

It was perceived that the faculty was happy to answer the questions, their explanation was clear and encouraged their

contribution to the workshop through appropriate questioning was friendly and approachable and sensitive to their difficulty. The challenges of the session were developing interaction, communication especially non-verbal and conducting role plays as a challenging task. As far as the feedback from the faculty is concerned, the analysis on the Likert scale showed that the majority agreed that there was a point in teaching communication skills also, the need for time management as per Table 2.

Table 2: Perception of the faculty regarding the training program (n=35)

| Questions | 1 (%) | 2 (%) | 3 (%) | 4 (%) | 5 (%) |
|---|-------|-------|-------|-------|-------|
| I cannot see any point in teaching communication skills | 37.5 | 0 | 62.5 | 0 | 0 |
| There is a need of time management in teaching communication skills | 0 | 12.5 | 12.5 | 12.5 | 62.5 |
| Nobody is going to fail their teaching degree for having poor communication skills | 12.5 | 12.5 | 62.5 | 0 | 12.5 |
| Developing my communication skills are just as important as developing my knowledge of teaching | 0 | 0 | 0 | 75 | 25 |
| Students will not be bothered to turn up to sessions on communication skills | 12.5 | 12.5 | 0 | 62.5 | 12.5 |
| Learning communication skills are interesting for students | 0 | 0 | 12.5 | 25 | 62.5 |
| Learning communication skills will improve the ability to communicate with patients | 0 | 0 | 0 | 12.5 | 87.5 |
| Learning communication skills will help students to respect patients | 0 | 0 | 12.5 | 12.5 | 75 |
| Learning communication skills will help students to respect their colleagues | 0 | 0 | 12.5 | 12.5 | 75 |
| Learning communication skills will help facilitate team-working skills of the students | 0 | 0 | 12.5 | 37.5 | 50 |

^{1 -} Strongly disagree, 2 - Disagree to some extent, 3 - Neutral, 4 - Agree to some extent, 5 - Strongly agree

DISCUSSION

Communication training has been emphasized in the medical education for a long time. This workshop was a practical implementation of communication training and feedback system for improvement of training system, i.e. a step for incorporation of these training in medical education system.

In our study, post-workshop feedback from the students about workshop and speakers showed that the majority of students were either strongly agreed or agreed about workshop organization, its content and the importance of workshop related issues. Similar results were found in a study done by Umran KUA and Adkoli BV in Saudi Arabia, observed that in post-workshop feedback, 24% students were strongly agree, and 43% students were agree to the appropriateness of the duration of workshop. 24% of the students were strongly agreed, and 38% students were agreed about the convenience of the venue of workshop. 26% of students were strongly agreed, and 42% students were agreed about the appropriateness of time allocation to each speaker.15% students were strongly agreed and 51% students were agreed about welldefined goals of workshop.10% students were strongly agreed and 51% students were agreed about adequateness of study material provided.15% students were strongly agreed and 51% students were agreed about relevance of contents in day-to-day clinical practice. 23% of students were strongly agreed and 44% of students were agreed that speakers were resourceful [22].

In our study, role play was emerged out as most preferred method of learning followed group discussion. Similar findings were found in a study done by Torke *et al.* that 23% were strongly agreed and 56.67% were agreed that role play exercise enhanced their understanding for how to break bad news to patient and relatives. Similarly, 26.67% were strongly agreed, and 66.67% were agreed that role play exercise enhanced their understanding of how to build a relationship with a patient [23].

In study by Engerer *et al.* showed that in evaluation of communication skill training course, interactive sessions with standardized patients and role plays were most preferred methods [24]. We experienced that both students and resource faculties were agreed about importance of incorporating communication skill training and its effectiveness in current

scenario. Both faculties and participants were agreed about good organization part of workshop, i.e., good and convenient venue and time allocation. This reflects good pre-workshop homework will help to effectively communicate a message to learners.

The practical implication of such workshops requires the cooperation of the faculty members as well as the time management to inculcate the need to develop communication skills in Indian Medical Graduates to ensure effective patient care.

CONCLUSIONS

The communication skills training workshop is a success as all the students' feedback were in favor of the workshop and its importance. Similarly, feedback from the faculty members as far as the practical application of the communication Skills Training Programme is supportive showing feasibility in its implementation in the near future.

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