



VM 502 – Core Document

Clinical Communication Program – 2017 Fall Semester

WSU College of Veterinary Medicine

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With special thanks to:

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Course Structure

Goal: *To enhance learners' ability to communicate effectively in veterinary medical contexts; that is, to communicate more accurately, efficiently, and supportively*

Course Structure:

Large Group Orientations:

- **Monday, September 11th, Bustad 210**
 - **Lab Session 1—1:10-3:00 pm**
 - **Lab Session 2—3:10-5:00 pm**

- **Tuesday, September 12th, Bustad 214**
 - **Lab Session 3—1:10-3:00 pm**

- **Purpose of Orientation:**
 - Provide an overview of the course and introduce core content
 - Prepare students for their small group interview sessions
 - Answer questions

Small Group Sessions:

- Six small group sessions on Mondays and Tuesdays, September 18th through October 24th
- Groups consist of 4 or 5 students with a practitioner or faculty coach
- During these sessions students will take turns conducting interviews with simulated clients
- All cases are based on real people and real veterinary cases that include both large and small animal contexts
- Using the *Calgary Cambridge Guides*, the practitioner coach and observing students will take notes during the client interviews
- When the interview is over and/or during time outs the interviewer or the coach may call, the student doing the interview will engage with his/her group, the client, and practitioner coach in a feedback/ tutorial session on the communication skills demonstrated during the interview
- Coaches will provide opportunity for students to do 'rewinds' of the interview (at any point)

End of Term Practical Assessment:

- A performance based examination will take place on October 30/31 and November 6/7 (see appendix A)

Learning Objectives for Phase 2 (3rd year):

You will be taking the objectives from phase 1 to the next level and taking up the new objectives (italics below).

- A. The student will demonstrate understanding of relationship-centred veterinary care.
- B. With a simulated or real client, the student will demonstrate ability to:
 - 1. Observe, accurately, the patient/herd/flock (if present), the client and the environment.
 - 2. Conduct a veterinary visit in which the student:
 - a. Relates to the client and the patient(s) in such a way as to establish a trusting relationship where the client is comfortable sharing his/her concerns
 - b. Elicits the information required to make an accurate assessment of the patient's (herd's/flock's) presenting problem(s) including the client's perspectives (i.e. beliefs, concerns, etc.)
 - c. Elicits the information required to make an accurate assessment of the patient's (herd's/flock's) overall health and functioning. The focus is on the patient's current needs and medical history
 - d. Recognizes and reacts appropriately to both verbal and non-verbal cues
 - e. *Gives information, explains and discusses it* appropriately with the client
 - f. *Appropriately engages with the client in planning and shared decision making.*
 - 3. Generate and list hypotheses concerning the patient's problems and the client's issues.
 - 4. Participate effectively in small group interactions, including working with peers, coaches, clients, and patients (if present).
- C. More specifically, the student will be able to:
 - 1. Understand and apply the communication process skills delineated in the complete Calgary-Cambridge Guides. *These include the skills on the Calgary Cambridge-Guide One that you used during Phase I, as well as the skills in two added sections under the headings of 'Explanation and Planning' and 'Options in Explanation and Planning'. (The section labelled 'Closing' stands alone on the complete C-C Guides instead of combining preliminary counselling and closing).*
 - 2. Apply these communication skills appropriately in a variety of day-to-day circumstances as well as those in which the client-veterinarian relationship may become difficult.
 - 3. *Begin to apply his/her expanding knowledge base regarding veterinary medicine during interactions with clients that involve history taking as well as explanation and planning. That is, begin to integrate communication skills with knowledge base, physical examination findings (when available), and medical problem solving at a higher level of competency.*
 - 4. Discuss ways in which communication process, content, and perceptual skills impact each other.
 - 5. Identify his/her attitudes, assumptions, and emotional reactions to the interview and discuss the role of these attitudes, assumptions, and emotions in facilitating or interfering with communication.
 - 6. Engage in the feedback process following each interview with clients:
 - a. Solicit feedback from peers, coaches and clients regarding his/her communication skills and attitudes
 - b. Discuss and apply suggestions for enhancing his/her performance
 - c. Develop his/her own self-assessment skills
 - d. Give concrete descriptive feedback to peers regarding their communication skills and attitudes.

Purpose:

- To give individual students opportunity to develop, practice and refine their communication skills in the context of actual visits with clients. The focus for Phase 2 (3rd year) is on taking skills developed in Phase 1 (2nd year) to the next level and on developing skills associated with explanation and planning, including shared decision making.
- To provide individuals with feedback from practitioner coaches and peers regarding their visits with clients and to use those visits as a springboard for the entire group's learning.
- To develop peer and self-assessment skills.
- To integrate the parts of the veterinary medical interview and the various content, process, and perceptual skills into coherent interactions with clients and patients.

What to expect in Phase 2 small group sessions: Summary of content for each session

During the small group sessions you will work with simulated clients. These clients and their animals will present with a variety of communication challenges and medical technical issues. With the simulated clients you will be working on enhancing your history taking skills, but this term you will have considerably more opportunity to explore the communication skills and capacities associated with explanation and planning, including clinical reasoning and shared decision-making.

You will be recording each of your interviews and saving your video recordings to your H Drive immediately following the interview so that you can review your videos easily. Rules of professional conduct and confidentiality apply to all video recordings, just as they do to any interaction with clients in veterinary settings.

Primary Resources: *These books are available in Wegner Hall Library (reserved section). Your coaches also have copies of the books that you can access.*

- The Core Document/Syllabus (**required reading**)
 - Appendix A: Practical Assessment
 - Appendix B: Round 1 and 2 case appointment books and suggested topics for preparation
- Adams C, Kurtz S. (2017) ***Skills for Communicating in Veterinary Medicine***. Oxford, UK: Otmoor Publishing and Parsippany, NJ: Dewpoint Publishing.
- Gray, C., & Moffett, Jenny. (2010). ***Handbook of veterinary communication skills***. Chichester, West Sussex; Ames, Iowa: Wiley-Blackwell. Animal Health Library Open Reserves SF610.5 .H364

Evaluation:

The Clinical Communication Program uses a modified pass/fail grading system. A mark of satisfactory requires the following:

- Participation/engagement in your small group lab sessions
 1. Conducting consultations with simulated clients
 2. Practicing self-assessment regarding the skills on the Calgary-Cambridge Guides following your visits with clients and through the Practical Assessment and Video Review.
 3. Soliciting and responding to verbal feedback from peers, clients, and coach(es)
 4. Offering well-intentioned, detailed feedback to your peers
 5. Participating in small group discussions in which the small group's interactions with clients, feedback discussions, time-outs, and rewinds serve as springboards for everyone's further learning
 6. Meaningful effort and participation in the practical assessment
- Professional conduct regarding attendance, confidentiality, and interaction with clients, peers, coaches

Attendance:

Each of your small group's lab sessions is designated as a **required exercise** - see link: <http://courses.vetmed.wsu.edu/policies/policies.aspx#Attendance> – professional conduct would require your attendance due to the presence of clients in any case. Incapacitating illness, evidence of an infectious disease (fever, etc.), or unanticipated emergency constitutes an 'excused absence' – ***please call Dr. Cary (509-595-0462) or Rachel Jensen (509-429-0861) prior to class time*** so that we are aware of your situation and can let your coach know you will not be present. For any other anticipated absence, you will need to talk with Dr. Cary in advance and need an 'excused absence' from the Attendance Committee.

Confidentiality:

- All cases are based on real patients and clients and are therefore confidential, just as they would be in any practice setting – you are at liberty to discuss details of the case only with members of your own small group.
- Like all your interactions with clients in veterinary settings, video recordings of your interactions are confidential and may not be reproduced or distributed.
- For learning to be optimal, learners need to experience the case for themselves without advance knowledge, hints, warnings, etc., so it is important not to talk about the cases with students from other small groups or other classes.
- Developing trust and a safe learning environment require that you hold in confidence what takes place in your small group and do not talk about it with others.

Academic Integrity:

Academic integrity is the cornerstone of higher education. As such, all members of the university community share responsibility for maintaining and promoting the principles of integrity in all activities, including academic integrity and honest scholarship.

Academic integrity will be strongly enforced in this course. Students who violate WSU's Academic Integrity Policy (identified in Washington Administrative Code (WAC) 50426-010(3) and -404) will receive a failing grade and will not have the option to withdraw from the course pending an appeal, and will be reported to the Office of Student Conduct. Cheating includes, but is not limited to, plagiarism and unauthorized collaboration as defined in the Standards of Conduct for Students, WAC 504-26-010(3). You need to read and understand all of the definitions of cheating:

<http://app.leg.wa.gov/WAC/default.aspx?cite=504-26-010>.

If you have any questions about what is and not allowed in this course, you should ask course instructors before proceeding. If you wish to appeal a faculty member's decision relating to academic integrity, please use the form available at conduct.wsu.edu.

Students with Disabilities:

Reasonable accommodations are available for students with documented disabilities or chronic medical conditions. If you have a disability and need accommodations to fully participate in this class, please visit the Access Center website to follow published procedures to request accommodations: <http://www.accesscenter.wsu.edu>. Students may also either call or visit the Access Center in person to schedule an appointment with an Access Advisor. Location: Washington Building 217; Phone: 509-335-3417. All disability related accommodations **MUST** be approved through the Access Center. Students with approved accommodations are strongly encouraged to visit with instructors early in the semester during office hours to discuss logistics.

Appendix A: Practical Assessment

Instead of a final you will complete a two-part **required** practical assessment. *Additional details that you will need about this assignment will be posted after mid-term, but here is an overview of what is involved:*

Purposes:

- To provide you and your coaches an end-of-term practical assessment regarding clinical communication skills, to identify at this point your specific clinical communication strengths, and next steps for ongoing development.
- To further develop your skills of self and peer assessment and feedback.

Client Interview (Part 1) – On October 30th or 31st you will have a 1 hour time block devoted to assessment. In order to accommodate the entire class you will be scheduled sometime between 11:00 am and 6:00 pm (on either Monday or Tuesday. We will work around your elective schedule to avoid course conflicts. You will complete a client interview, which will be video-recorded. You will need to review your video prior to part 2 and reflect on your interaction with the client.

Video-Review (Part 2) - To complete the second part of the assessment, you will work with a randomly selected peer and coach. The Video Review sessions will all occur on November 6th or 7th and will require 2 hours for each pair of students. Again, in order to accommodate the entire class you will be scheduled sometime Monday, November 6th, between 10:00 am and 6:00 pm –or– Tuesday November 7th between 11:00 am and 6:00 pm.

The schedule for both the client interview and video-review will be posted on the bulletin board outside Rachel Jensen's office (Bustad 203) and on the course website (www.ccp.vetmed.wsu.edu/students).

More specific information on the assessment:

1. Prior to working with your peer and the coach/examiner, look at the video of your own interview with the standardized client and assess yourself regarding the communication process skills on the Calgary-Cambridge Guide. Include notes on skills you did well and those you may have missed or done inadequately – comment in your notes on how what you did in this interview related to the five “Principles for Effective Communication” or how your use of the skills on the guide impacted accuracy, efficiency, and supportiveness.
2. With the self-assessment notes you made in step #1 in hand, meet with the coach/examiner and your peer to review each other's videos. As you watch, continue your self-assessment and assess your peer, including discussion of notes described in #1 above.
3. Discuss your observations regarding each other's videos and then compare yourself and peer assessments with the coach/examiner's assessments. This is not about reaching consensus, but rather about considering each other's perspectives. If disagreement remains after discussion, the coach/examiner's rating stands. The coach will have other materials from exam day regarding the content details that you obtained from your client or discussed with him or her during your interview, as well as the client's written feedback.
4. Hand in the self-assessment notes you made on the Calgary-Cambridge Guide and any notes you made regarding your peer assessment to your coach/examiner.

Appendix B: Case Appointment Books with suggestions for preparation

Round One:

- Jenice [Jim] Braun, 509-276-9677; Crown Princess, 6 month old sorrel quarter horse filly; farm call for suspected respiratory illness.
 - Causes of equine respiratory illness
 - Baseline diagnostics indicated
 - Treatment options
- Joe [Jolene] Thomas, 509-789-9013; Styx, 6 year old spayed Sheltie; Annual wellness exam
 - Components of effective wellness exams including pertinent history
 - Nutrition and exercise recommendations
 - Middle age canine wellness and prevention recommendations
- Lauren [Loren] Dyer, 509-586-5916; Tank, neutered male DSH cat of unknown age; fracture (presumed HBC)
 - Steps for managing hit-by-car animals
 - Femur fracture repair/management options
 - Post-operative fracture repair care
- Joseph Conn, 509-269-3249; Holstein cows; Farm call for routine pregnancy checks and look at a cow that is not well
 - Common post-calving disorders in cattle
 - Management recommendations for post-calving problem prevention
 - Welfare considerations for recumbent cattle
- Diane [Dean] Trimble, 509-337-6463; Fernie, 11 week old female Border Collie; In house (private practice) well puppy exam
 - Puppy wellness needs
 - Behavior considerations

Round Two:

- Eve Weston, 509-337-6463; Raleigh, 9 year old spayed German Shepherd; In house (Teaching Hospital ICU) Emergency presentation for recent collapse
 - Reasons for collapse in this signalment
 - Diagnostic options, costs and benefit of each
 - Treatment options for the big categories of collapse

- Karen Skinner, 509-429-2564 Molly, 12 year old spayed DMH cat; In house (private practice) recent weight loss
 - Common causes of weight loss in a house cat
 - Diagnostic tests, costs and benefits
 - Treatment options for the most common causes of significant unintended weight loss in a cat

- Paula [Peter] Dunlop, 509-884-2013; Postbox, 14 year old neutered DSH cat; In house (private practice) inappetence and lethargy.
 - Causes of inappetence and lethargy in a cat
 - Diagnostic tests, costs and benefits
 - Anesthesia risks in cats
 - Treatment options of common causes of poor appetite and low energy

- Christian Jasso, 509-485-8465; Rey, 2 ½ year old Sorrel Quarter Horse colt; farm call for castration
 - Risks and benefits of castration in horses
 - Risks and benefits of field anesthesia

- Melvin [Melinda] Albrecht, 509-426-4853; Sannen goats (Willow and Aspen); in house; Caprine Arthritis Encephalitis (CAE) and Caseous Lymphadenitis (CL) testing
 - What are the indications for these tests and how are they performed
 - Goat dairy management and husbandry