Improving Resident-Patient Communication: a CQI Initiative
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Introduction
Communication represents one of the core competencies for all ACGME programs, but it is commonly taught by modeling it as a process of information exchange, which can leave residents feeling dissatisfied, which may not be true from the patient’s perspective. 

Method
6 residents took part in this study at a local community hospital during a rotation in the summer of 2016 as part of the 2016-2017 academic year. Prior to the intervention the residents viewed the KEEC-A to understand the essentials of physician-patient communication. The intervention group were given video feedback on a patient interaction during week 1 and week 4 of the rotation. At these points the attending and the residents rated the resident. Between week 1 and week 4, residents focused on lower scored areas of the KEEC-A in order to improve communication. A similar study took place with 6 residents during the prior academic year with residents asked to assess their communication skills before/after with a self-assessment survey (this was not performed).

Attending Scores: improved between week 1 to week 4.
For the mode, the attending gave a score of 3 for most categories initially, then a score of 5. Many residents improved by 2 points.
For the mean, the attending gave a score of 3.5 for all categories initially & improved to 4.5.

Resident Scores: improved between week 1 to week 4.
For the mode, residents generally started with a score of 3, some improved to a score of 4.
For the mean, the residents generally started with a score of 2.5, then a score of 4, and improved to a score of 3-4.

Discussion
This study supports the reality that residents and attending physicians agree on the importance of patient communication.

Conclusion
- Resident self-evaluation scores on the KEEC-A improved after intervention (mode & mean)
- Attending KEEC-A score improved after intervention, but this trend was not statistically significant.

References