Innovation

We developed two standardized patient (SP) scenarios intended to generate:

- A less-is-more conversation (in response to a patient requesting an unnecessary test)
- A shared decision-making conversation (in response to a patient choosing between multiple effective treatment options)

…and then collected validity evidence based on Messick’s unified validity framework supporting the use of these scenarios to assess HVCCC communication skills among third-year medical students (n=93).

Need/Gap Addressed

Competence in HVCCC requires physicians to understand the benefits, harms, and relative costs of medical interventions and apply this knowledge to individual patient encounters. Examples include:

- Sensitively responding to patients who request unnecessary diagnostic or therapeutic interventions
- Customizing care plans by helping patients choose effective interventions that reflect their values and preferences

Physicians who are skillful at facilitating these types of patient-centered HVCCC conversations will be better equipped to promote healthcare value in their day-to-day practice.

Resources and Timeline

- Space for students to interact with SP’s
- SPs required approximately three hours of training per scenario. Physician raters required approximately 30 minutes of training per scenario
- Implementation time for SP’s and physician raters was 30 minutes per student per scenario, including:
  - 8 minutes (max) for the student to review a pre-encounter document
  - 13 minutes (min) for the student to interact with the SP
  - 7 minutes for feedback from the SP and physician rater
  - 2 minutes of transition time

Results

Ninety-three students participated at the end of their third year. Mean checklist scores were 79% (SD 18) for the less-is-more scenario (Cronbach alpha 0.72) and 72% (SD 13) for the SDM scenario (Cronbach alpha 0.62).

Checklist scores were correlated with global ratings of performance (r = 0.65 and 0.54 for the less-is-more and SDM scenarios respectively, both P < 0.001), and overall inter-rater reliability was excellent (r = 0.66).

Both scenarios discriminated between higher and lower performers (discrimination indices of 0.84 and 0.65 respectively, both P < 0.001).

Most students (83/90, 92%) moderately or strongly agreed that the session improved their HVCCC communication skills.

Institutional Contact

Detailed scenario descriptions, SP training guides, student instructions, checklists, and an implementation guide are available to medical educators upon request.

Contact: Neena Natt, MD (natt.neena@mayo.edu)