

Bad News Better: Teaching breaking bad news at times of a pandemic

Reem J Alansari*^{1,2} MD MMSc MedEd
Roger Dias^{2,3} MD MBA Ph.D.
Deborah Navedo^{2,3} Ph.D. CPNP FNAP

1 Arabian Gulf University, Bahrain; 2 Harvard Medical School, Boston MA; 3 Brigham and Women's Hospital, Boston MA.

Abstract

Background: The COVID-19 pandemic has changed the medical education landscape, and medical educators were faced with unprecedented challenges in providing medical students with authentic learning experiences under new and unprecedented circumstances.

Objectives: The purpose of this mixed-methods sequential explanatory study was to identify the impact of a novel educational intervention on senior medical students learning how to break pandemic-related bad news to patients and families remotely, and to evaluate their learning experience and emotional activation to the intervention.

Methods: A three-hour educational intervention the “Bad News Better workshop” for Arabian Gulf University senior medical students in the Kingdom of Bahrain, was developed according to Kern’s six steps of curricular development for medical education. Grounded in Kolb’s experiential cycle of learning as an educational framework, the workshop included an interactive introduction of the validated (SPIKES) protocol for breaking bad news (BBN), role-play exercises, feedback, reflections and discussions, and objective structured clinical examinations with trained standardized patients. Learner characteristics, previous experiences, and self-perceived confidence pre/post-course were collected. In addition, we collected pre/post self-reported and standardized patient assessments of BBN skills, post-course survey evaluations, and finally, in-depth semi-structured interviews to measure learner learning experience and emotional activation.

Results: Thirty-two medical students participated in the workshop. Learners' self-reported confidence level in BBN to patients and standardized patient assessment of skill in BBN to patients improved significantly ($p < 0.001$). Self-assessment of BBN skills improved significantly in all but one aspect “the use of medical jargon” ($p < 0.001$ and $p = 0.243$ receptivity) and learner ratings of the workshop were very high for all items.

Although we were not able to find strong correlations between emotional activation and learning quantitatively despite using a validated tool, through qualitative analysis, we identified a series of themes associated with the learning experiences and related emotions that had a substantial impact on the way the participants learned how to BBN during the workshop.

Conclusion: This reflective, simulation-based workshop successfully improved medical students’ confidence and skills in BBN to patients and provided insight into practices that can help learners participate affectively in remote simulation-based learning interventions to teach communication skills such as BBN.