Communication Workshop Improvement through Direct Participant Feedback
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Introduction:
In the fall of 2014 our large hospital system in New York City implemented a "Relationship Centered Patient-Provider Communication Workshop" to improve patient-provider communication skills across the system. We sought to evaluate the program through direct participant feedback.

Assessment Methods:
Participant feedback is obtained through a CME-linked web-based survey which must be completed within 1 week of the course in order to receive CME credit and elicit timely feedback. The survey uses a 5-point scale from “5-Significant” to “1-Never/Rarely” for CME content related to enhancing medical competence as well as YES/NO questions to measure perceived usefulness, and open ended questions to solicit suggestions for course modification to meet participant goals. We present data from this survey.

Program Evaluation Results:
Surveys were analyzed from the start of the program in November 2014 through January 2016. To date, 302 participants from 20 different specialties have completed this full-day Workshop. 231 participants responded to the survey for a response rate of 76%. 94% of respondents would recommend the course to colleagues (218/231). 82% of respondents answered 4 or 5 on a 5-point scale, to the medical competence question related to professionalism and effectiveness with patients and care teams. 96% felt the course was scientifically sound, evidence-based, objective, and balanced. 45% perceived barriers to changing their practice with over half of responses to this question citing lack of time to assess/counsel patients as the major barrier. Regarding content, 88% of participants felt the format of this activity appropriate to the content presented. Of the 27 people who responded “no” or “somewhat” to the appropriateness of the format, the primary suggestion was to include more case based presentations. 89% of participants felt they learned new methods for the opening/body/closing of the medical interview. Open-ended questions for course modification yielded multiple different answers with 42 respondents suggesting shortening the course.

Discussion/Implications:
The success of communication skills training at a large institution depends on offering relevant course content in an appropriate format. The results of our evaluation of our program suggest that although the vast majority of participants agree with the current content and format, a subset of participants would modify the course to make it shorter and include more case-based presentations. These findings may be useful for other institutions considering implementation or modification of patient-provider communication programs.