People Don’t Care What You Know, Until They Know You Care

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Disclosures: None
I’ve Had Some Amazing Mentorship

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Sixty-eight percent of respondents did not feel that they received adequate training in bereavement activities during their training.

Negative predictors of active bereavement follow up:
- Feeling uncomfortable about what to say
- Lack of bereavement support services
Outline

• Audience Participation!
• Institution and Individuals, why this matters
• Discuss communication gaps between cancer patients and health care professionals
• Address deficits in communication training
• Discuss team dynamics and therapy team-patient communication
Audience Survey Question 1

What proportion of patients with incurable cancer understand that palliative radiation \textbf{will not} cure their cancer?

- 25%
- 40%
- 65%
- 80%
Audience Survey Question 2

Listening to a cancer patient and doing less can lead them to live longer.

• True
• False
Audience Survey Question 3

When encountering emotional patient situations at work, I have adequate opportunity to debrief.

- True
- False
First... Some words from a patient.
“I was diagnosed with cancer in November and the initial fear was that the cancer had metastasized into my bones. My wife and I spent nearly a month wondering how much time I had left on earth...”
Why the Interest in Communication?

LATEST ADVANCES

CUTTING EDGE TECHNOLOGY

STATE-OF-THE-ART

PINPOINT ACCURACY

- Hospital/Institution
- Radiation Oncology Department
- Treatment Team
- Patient
Technical Expertise and Dedication to Your Work is Only the Price of Admission
The Age of Consumer Reviews

I just finished radiation therapy for prostate cancer at the center. The staff is professional yet friendly. Many of the patients I got to know over the weeks were delightful. The doctors are top-notch and the center is "state of the art". I actually miss my daily visit. Cancer sucks, and I don't recommend it to anyone, but this place makes it much more bearable.

Was this review ...?

Useful 2  Funny  Cool 1
Patient Satisfaction and Reimbursement

The New York Times
“Test for hospital budgets: Are the patients pleased?” 11/7/11

The Washington Post
“Should Medicare pay hospitals for leaving patient’s satisfied?” 4/22/13

Los Angeles Times
“Healthcare overhaul leads hospitals to focus on patient satisfaction” 7/20/13
Medicare Value-Based Bonuses

- Clinical Performance Guidelines 70%
- Patient Satisfaction 30%
A Reciprocal Relationship

- Patient
- Treatment Team
- Radiation Oncology Department
- Hospital/Institution
Communication Gaps in Cancer Care

photo courtesy Dave Thorne
Multidisciplinary Cancer Care
“Overall, 69% of patients with lung cancer and 81% of those with colorectal cancer did not report understanding that chemotherapy was not at all likely to cure their cancer.”
Audience Survey Question 1

What proportion of patients with incurable cancer understand that **palliative radiation will not cure their cancer**?

- 25%
- 40%
- 65%
- 80%
“However, 64% did not understand that RT was not at all likely to cure them.”
Where is the Disconnect?

- Discrepant disclosure
  - Denial
  - Assessment of understanding

- We just don’t like to discuss death
  - It’s depressing
  - It takes away hope
  - It’s not culturally appropriate

- We don’t really know how they’ll do
- Somebody else will do it
Communication Training

photo courtesy Dave Thorne
Communication Training

“I just felt that they might need to learn some bedside manner stuff or know how to say things to people, but that comes with practice and experience I guess.”

Halkett, 2007
It Goes Beyond Training

Communication is learned through modeling, practice, feedback and deliberation.

**NOVICE**
- Practice
- Feels Awkward

**SKILLED**
- Deliberate
- Feel Competent

**ROLE MODEL**
- Mastery
- Second Nature

Oncotalk
Compared to untrained team members, trained team members used more turns of speech with content oriented toward available resources in the team, more assessment utterances, more empathy, more negotiation and more emotional words, and their self-efficacy to communicate increased.
Uniqueness of the Radiation Therapy Setting
Number of Scheduled Hours by Team

- Therapy Team: 9.75 hours
- Physician: 2.75 hours
Patient Contacts Over Treatment Course

Physician

Therapy Team
“Medical dosimetrists must remain sensitive to the physical and emotional needs of the patient through good communication and patient assessment. Radiation therapy often involves daily treatments extending over several weeks using highly sophisticated equipment. It requires thorough initial planning as well as constant patient care and monitoring.”
"But it’s busy and we’re way behind…"

• A relaxed patient is a reproducible patient
• An anxious patient takes more time to treat
• A patient with whom you’ve developed a relationship is much more understanding than one that isn’t
• Lack of relationship results in negative feelings about radiotherapy and uncertainty of the skills of the therapy team
Communicating With and Around Radiation Therapy Patients
Being a Patient is a State of Emotional Vulnerability

To Form Relationships

Emotional Vulnerability

To Be Understood

To Feel Safe

Egestad H, 2013
“I had one experience where I was lying on the table ...and all of a sudden this man appeared, his head was at my height and he just starts maneuvering me, not hello or whatever”

Halkett, 2007
Knowing Your Team

Introduce yourself and everyone else there!

A - Acknowledge
I - Introduce
D - Duration
E - Explanation
T - Thank you

Explain may be treated by different people

Acknowledge patients you encounter, even if you are not currently treating them
Connecting Requires Familiarity

“The staff are very nice, but too much change over. If you are lying there half naked you do not really want every second or third day someone else touching you and moving you around.”

Personal contact develops a sense of familiarity and is therapeutic

One size doesn’t fit all

• “Monitors” vs. “Blunters”
Being a Patient is a State of Emotional Vulnerability

To Form Relationships

Emotional Vulnerability

To Be Understood

To Feel Safe

Egestad H, 2013
“The mask was absolutely terrible. I had claustrophobia. The team was fantastic. They know how it felt for me: lying there was absolutely terrible.”
A Reciprocal Relationship

“The radiation therapist asked me, “How are you?” and I answered, “I am ill, I’m eating little and it is hard for me to swallow”. Then they told me “Talk to the doctors.”
Being a Patient is a State of Emotional Vulnerability

To Form Relationships

Emotional Vulnerability

To Be Understood

To Feel Safe

Egestad H, 2013
OOPS!
WHAT THE...?
DANG IT!
MY BAD!
UH-OH...
“Then suddenly, one day, I was transferred to another machine and to other people. They did not know how the bolus should be; it took a long time, and they became unsure. Another radiation therapist had to show them how it should be. I was so scared.”

• The words we choose mean something
  • “He/she is not setting up” vs. “We’re not setting up”
What Are You Doing?

“I didn’t like to talk to them or ask them questions while they were busy measuring me up because I didn’t want them to put in the wrong measurement.”

- Patients should always feel open (and encouraged) to ask questions
- Not having an opportunity to have discussions leads to discomfort and dissatisfaction
This therapy for patients with incurable lung cancer improved median survival from 8.9mo to 11.6mo.

It’s not this drug, which is used in the same group, has the same survival benefit and costs $12,500 every month.

EARLY PALLIATIVE CARE
- assess and treat physical and psychological symptoms
- establishing goals of care
- assisting with treatment decisions
- coordinating individual care

EARLY PALLIATIVE CARE GROUP
- HIGHER QOL scores
- LESS Depression
- LESS aggressive end of life care

I have adequate opportunity to debrief on the emotional impact of patient care with my team or in my workplace.

- Yes
- No
Take Home Points

• The relationship our patients develop with the radiation treatment team is unique in medicine and what makes our jobs awesome and personally fulfilling.

• It is all of our responsibility to be sensitive to our patients needs and be their advocate.

• Communication is a skill and like any other requires a deliberate approach.

• To address emotional vulnerability
  • To form relationships
  • To be understood
  • To feel safe
The incidence of burnout or compassion fatigue in medical dosimetrist as a function of various stress and psychologic factors

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Back to our Patient

“To the therapy team, thank you all for the sacrifices you made earning your technical expertise to help give me a longer and healthier life. I started out as an anxious new patient and could never have imagined the level of compassion, consideration, good humor, extraordinary care and friendship I have received from you. I leave with a heavy heart...what I expected to be weeks of boredom and drudgery turned into a daily delight.”
Thank You!

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References


Halkett GK et al. Effective communication and information provision in radiotherapy—the role of radiation therapists. Journal of Radiotherapy in Practice, 9; 3-16. 2010


Oncotalk, Improving oncologists’ communication skills. http://depts.washington.edu/oncotalk/
