

MINISTRY OF HEALTH OF UKRAINE
ODESA NATIONAL MEDICAL UNIVERSITY
Department of simulation medical technologies

Syllabus of the academic discipline
«Breaking Bad News to a patient. SPIKES protocol»

Scope of the academic discipline	Total number of hours per discipline: 90 hours, 3 ECTS credits Semester: XI — XII 6th year of study
Days, time, place of educational discipline	According to the schedule of classes Department of simulation medical technologies Odesa, Valikhovsky Lane, 3
Teacher(s)	Assistant of professor Yulia BELOZERTSEVA — BARANOVA Assistant of professor Andrii DOBROVOLSKYI Assistant of professor Olena KAZIMYR
Contact Information	E-mail: simmedtech@onmedu.edu.ua Consultations: from 14.30 to 16.30 every working day

COMMUNICATION

Communication with students of higher education will be conducted in the classroom (face-to-face).

During distance learning, communication is carried out through the Microsoft Teams platform, as well as through e-mail correspondence, Viber, WhatsApp, Telegram messengers (through groups created in Viber, WhatsApp, Telegram for each group, separately through the head of the group).

ABSTRACT OF THE ACADEMIC DISCIPLINE

The subject there is a complex of professional communication issues, skills and ability to communicate with the patient and his relatives during the notification of bad news.

Prerequisites: based on the knowledge gained during the study of previous disciplines: medical biology, normal human anatomy and physiology, pharmacology, history of medicine, cultural studies, simulation medicine (patient care), as well as the study of the basics of psychology, hygiene, pathological anatomy, pathological physiology, emergency medicine, therapy, surgery, and other clinical disciplines and integrates with these disciplines.

Post-requisites: improves theoretical knowledge and practical skills in communication with the patient and his relatives during the notification of bad news.

The aim is acquisition of practical skills and improvement of communicative competences by the student of higher education, using simulation teaching methods. Formation of students' systematic understanding of the algorithm for notifying the patient or his relatives of bad news according to the SPIKES protocol. Formation of a systematic understanding by students of the algorithm for reporting sudden death, medical error.

Task:

1. Formation of skills and skills in structuring the consultation when notifying the patient or his relatives of bad news.
2. Formation of skills and abilities to create an atmosphere of support and establish contact, build relationships, understand the patient's needs and plan for further cooperation when notifying the patient or his relatives of bad news.

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3. Mastering the ability to determine the tactics of behavior during notification of bad news, sudden death, medical error.

Expected results:

As a result of studying the academic discipline, the student of higher education must:

To know:

- The algorithm for notifying the patient or his relatives of bad news according to the SPIKES protocol: organization of space for communication
- Evaluation of the patient's perception
- Skills for obtaining permission to discuss patient problems
- Explanation of the main facts about the main problem, emotional attitude, support, choosing the best treatment plan
- Algorithm of behavior during sudden death, medical error CONES protocol
- Organization of space for communication, skills of reporting important news, chronology, emotional attitude, support

Be able to:

- Be emotionally ready for a difficult meeting
- Create space for discussion
- Possess verbal and non-verbal skills, active listening skills
- Use professional communication skills to deal with the patient's emotions
- Clarify the patient's thoughts and expectations
- Assess readiness to accept bad news
- Create a therapeutic alliance with the patient

DESCRIPTION OF THE ACADEMIC DISCIPLINE

Forms and methods of education. The discipline will be taught in the form of practical classes (30 hours) and organization of students' individual work (60 hours).

Consultations are individual.

Teaching methods.

Practical classes: conversation, role-playing, solving situational problems, practicing and controlling practical skills using the "Standardized patient" method, passing simulation scenarios, solving test tasks.

Individual work: individual work with the recommended basic and additional literature, electronic information resources, individual work with a bank of test tasks, preparation for practical classes.

Content of the academic discipline:

- Topic 1. SPIKES protocol. Definition and criteria of its application
- Topic 2. SPIKES protocol. Step 1 and Step 2
- Topic 3. SPIKES protocol. Step 3 and Step 4
- Topic 4. SPIKES protocol. Step 5 and Step 6
- Topic 5. Final lesson

List of recommended literature:

Main:

1. SPIKES protocol
2. "The Complete Guide to Communication Skills in Clinical Practice" Walter F Baile MD Professor, Behavioral Science and Psychiatry

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3. Tsilmak O.M. Plans of practical classes in the educational discipline "Psychological counseling": practicum. Odesa: Phoenix, 2021. 102 p.
4. Nancy McWilliams Psychoanalytic Supervision 2021
5. Azize Asanova, Olena Khaustova "Typical complex situations in doctor-patient interaction depending on personal characteristics and mental state of the patient's response" Psychosomatic Medicine and General Practice Volume 3 No. 3, 2018
6. Personality disorders: evolution of views and modern conceptualization Pavlenko T.M. 2018 Neuronews Journal Psychoneurology and Neuropsychiatry https://neuronews.com.ua/ua/archive/2018/4-5%2897%29/pages-36-39/rozladi-osobistosti-evolyuciya-poglyadiv-i-suchasna-konceptualizaciya#_gsc.tab=0

Additional:

1. Minicuci N, Gorato C, Rocco I, Lloyd-Sherlok P (2020) «Survey of doctors` perception of professional values» <https://doi.org/10.1371/journal.pone.0244303>
2. "The Complete Guide to Communication Skills in Clinical Practice" Walter F Baile MD Professor, Behavioral Science and Psychiatry
3. Nancy McWilliams Psychoanalytic Diagnosis, Second Edition Understanding Personality Structure in the Clinical Process 2011
4. Suchman A, Deci E, McDaniel S and Beckman H (2002) Relationship centered administration. In R Frankel, T Quill and S McDaniel (eds) Biopsychosocial Care. University of Rochester Press, Rochester, NY
5. Suchman A, Sluyter DM and Williamson PR (2011) Leading Change in Healthcare transforming organizations using complexity, proactive psychology and relationship-centered care. Radcliffe Publishing, Oxford
6. Silverman J and Kinnersley P (2010) Doctors' non-verbal behavior in consultations look at the patient before you look at the computer. Br J Gen Pract. 60 (571)

Electronic resources:

1. <http://moz.gov.ua> — Ministry of Health of Ukraine
2. www.neuronews.com.ua — "NeuroNews: Psychoneurology and Neuropsychiatry" magazine
3. www.ama-assn.org — American Medical Association / American Medical Association
4. www.who.int — World Health Organization
5. www.dec.gov.ua/mtd/home/ — State Expert Center of the Ministry of Health of Ukraine
6. <http://bma.org.uk> — British Medical Association
7. www.gmc-uk.org — General Medical Council (GMC)
8. www.bundesaerztekammer.de — German Medical Association
9. "Psychology of doctor-patient relationship in general medicine" Jose Luis Turabian 2019 <https://www.peertechzpublications.com/index.php/abstracts/psychology-of-doctor-patient-relationship-in-general-medicine>
10. Minicuci N, Gorato C, Rocco I, Lloyd-Sherlok P (2020) «Survey of doctors` perception of professional values» <https://doi.org/10.1371/journal.pone.0244303>

EVALUATION

Forms and methods of current control:

- oral control: individual survey on questions of the relevant topic;
- written control: assessment of solving clinical situational problems, practice and control of practical skills using the "Standardized patient" method;
- test control: assessment of solving test tasks.

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Criteria of ongoing assessment at the practical class

Rating	Evaluation criteria
Excellent "5"	The applicant takes an active part in the lesson; demonstrates deep knowledge, gives complete and detailed answers to questions. Thoroughly and comprehensively knows the content of theoretical issues, fluent in professional and scientific terminology. Thinks logically and constructs an answer, freely uses acquired theoretical knowledge when analyzing practical tasks. When solving a clinical problem, he correctly interprets the anamnesis data, the results of clinical, laboratory and instrumental studies, correctly answers all the questions and convincingly substantiates his point of view, can propose and justify an alternative version of the decision on individual issues. When solving a practical task according to the OSCE type, he correctly demonstrates the performance of practical skills on simulation models and mannequins, strictly adheres to the algorithm of their implementation
Good "4"	The acquirer participates in the class; knows the material well; demonstrates the necessary knowledge, but answers the questions with some errors. He knows the content of theoretical issues deeply and comprehensively, and has professional and scientific terminology. Thinks logically and constructs an answer, uses acquired theoretical knowledge when analyzing practical tasks. But when teaching some questions, there is not enough depth and argumentation, it makes insignificant mistakes, which are eliminated by the student himself when the teacher points them out. When solving a clinical problem, minor errors or inaccuracies are assumed in the interpretation of anamnesis data, results of clinical, laboratory and instrumental studies, he answers all the questions without significant errors, fully substantiates his point of view, but proposals for an alternative option cause difficulties. When solving a practical task according to the OSCE type, minor errors in the algorithm and technique of performing skills on simulation models and mannequins are corrected at the instruction of the teacher
Satisfactory "3"	The acquirer sometimes participates in the activity; partially speaks and asks questions; makes mistakes when answering questions. Possesses a basic amount of theoretical knowledge, uses professional and scientific terminology inaccurately. Experiences significant difficulties in constructing an independent logical answer, in applying theoretical knowledge in the analysis of practical tasks. There are significant errors in the answers. When solving a clinical problem, he interprets the history data, the results of clinical, laboratory and instrumental studies with errors, does not know individual details, allows inaccuracies in the answers to questions, does not adequately justify his answers and interprets the wording, experiences difficulties in completing tasks and proposing alternative options. When solving a practical task according to the OSCE type, significant errors are assumed in the algorithm and technique of performing skills on simulation models and mannequins
Unsatisfactory "2"	The acquirer does not participate in the lesson, is only an observer; never speaks or asks questions, disinterested in learning the material; gives incorrect answers to questions. Has not mastered the basic amount of theoretical knowledge, shows a low level of mastery of professional and scientific terminology. Answers to questions are fragmentary, inconsistent, illogical, cannot apply theoretical knowledge when analyzing practical tasks. There are a significant number of

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	gross errors in the answers. When solving a clinical problem, he cannot interpret the received history data, the results of clinical, laboratory and instrumental studies, answer the questions, or makes significant mistakes in the answers; could not justify his decisions or does it unconvincingly. It does not offer alternative options. When solving a practical task according to the OSCE type, gross errors and errors in the algorithm and technique of performing skills on simulation models and mannequins will not be demonstrated or assumed
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Forms and methods of final control: test

Test is given to the applicant who completed all tasks of the work program of the academic discipline, took an active part in practical classes, completed and defended an individual assignment and has an average current grade of at least 3.0 and has no academic debt.

Test is carried out: at the last lesson before the beginning of the examination session — at ribbon system teaching, on to the last occupation — with a cyclical system of education. The test score is the arithmetic mean of all components on a traditional four-point scale and has a value that is rounded using the statistical method with two decimal places after the decimal point.

INDIVIDUAL WORK OF HIGHER EDUCATION ACQUIRES

Individual work of the applicant: individual work with recommended basic and additional literature, electronic information resources, individual work with a bank of test tasks, preparation for practical classes.

ACADEMIC DISCIPLINE POLICY

Deadlines and Rescheduling Policy:

- absences from classes due to non-respectable reasons are worked out according to the schedule of the teacher on duty;
- absences due to valid reasons are worked out according to an individual schedule with the permission of the dean's office.

Academic Integrity Policy:

Applicants must observe academic integrity, namely:

- independent performance of all types of work, tasks, forms of control provided for by the work program of this educational discipline;
- references to sources of information in case of use of ideas, developments, statements, information;
- compliance with the legislation on copyright and related rights;
- provision of reliable information about the results of one's own educational (scientific) activity, used research methods and sources of information.

Unacceptable in educational activities for participants of the educational process are:

- the use of family or official ties to obtain a positive or higher grade during any form of control of academic performance or academic merit;
- use of prohibited auxiliary materials or technical means (cheat sheets, notes, micro-earphones, telephones, smartphones, tablets, etc.) during control measures;
- going through procedures for monitoring the results of training by fake persons.

For violation of academic integrity, students of higher education may be held to the following academic responsibility:

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- decrease in the results of assessment of individual survey, performance of test tasks, assessment for solving situational tasks, performance of individual task, credit, etc.;
- retaking the assessment (test tasks, situational tasks, individual tasks, assessment, etc.);
- assignment of additional control measures (additional situational tasks, individual tasks, tests, etc.);
- conducting an additional inspection of other works authored by the violator.

Attendance and Tardiness Policy:

State of health: applicants suffering from acute infectious diseases, including respiratory diseases, are not allowed to attend classes.

Lateness to classes is not acceptable. A student who is late for class can attend it, but if the teacher has put "nb" in the journal, he must complete it in the general order.

Use of mobile devices:

The use of any mobile devices is prohibited. In case of violation of this clause, the student must leave the class and the teacher will write "nb" in the journal, which he must complete in the general order. Mobile devices may be used by students with the permission of the instructor if they are needed for the assignment.

Behavior in the audience:

The behavior of applicants and teachers in the classrooms must be working and calm, strictly comply with the rules established by the Regulations on academic integrity and ethics of academic relations at Odesa National Medical University, in accordance with the Code of Academic Ethics and University Community Relations of Odesa National Medical University, Regulations on Prevention and detection of academic plagiarism in the research and educational work of students of higher education, scientists and teachers of Odesa National Medical University.