THE PATIENT SUPPORT CORPS:
A MODEL FOR TRAINING MEDICAL STUDENTS
AND PROVIDING COMPASSIONATE CARE

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PRESENTED TO THE COMPASSION CENTERED CARE GROUP AT
DARTMOUTH

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Support Provided by:
Arthur Vining Davis Foundations
Schwartz Center for
Compassionate Healthcare
The Center for Shared Decision
Making
PSC Mission: Caring Attitudes, Enhanced Communication

• Patients:
  • Facing major medical decisions – worried, overwhelmed
    • Offers question listing support
    • Evaluating options
    • Visit support

• Students:
  • Trained in the PSC model
  • Tool for enhanced communication
  • Gaining the patient perspective
# Patient Support Corps Model

<table>
<thead>
<tr>
<th>Before Visit</th>
<th>During Visit</th>
<th>After Visit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Send decision aids</td>
<td>3. Take Notes</td>
<td>5. Burn CD</td>
</tr>
<tr>
<td>2. List questions</td>
<td>4. Make recordings</td>
<td>6. Print notes</td>
</tr>
<tr>
<td><img src="image1.png" alt="Decision Aids" /></td>
<td><img src="image2.png" alt="Recording Device" /></td>
<td><img src="image3.png" alt="CD Symbol" /></td>
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<tr>
<td><img src="image4.png" alt="Questions List" /></td>
<td><img src="image5.png" alt="Recordings" /></td>
<td><img src="image6.png" alt="Print Notes" /></td>
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</tbody>
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7. Review and Reflect
Arthur Vining Davis Foundations Grant

Nov: 203
Asha receives Schwartz fellowship for her project

01/2014 – 02/2014
Study outline developed

End of 02/2014
Medical student recruitment: 12 students

Training dates
04/01 – 04/02
*Data collection point

01/2014 – 03/2014
Team works on developing measures

Measure Finalized: Used for data collection

Students interview mock patient
*Data collection point

Students interview patients
*Data collection point
Defining Compassion

“understanding others as individuals with unique needs”

“ongoing self-reflection”

“mutual decision making”

“responding to patients’ and families’ histories and needs”

“communicating sensitively”

“collaborative participation of patients”

“mutual decision making”
Development of a Measure

- Correlated with our definition of compassion
  - Multiple elements explored
  - Patient and student items correlated
- Evaluated the process of eliciting patient questions
  - “Question Listing”
- Student and partner/patient experience
  - Pre- and Post-training
Item Development

• Focus groups convened to discuss items
  • “The question listing process increased my understanding of the patient as an individual”
  • “I was able to list all my questions and concerns”

• 0 to 100 scale indicating agreement
  • Where 0 is fully disagree, 100 is fully agree
  • Allowed for quantitative values

• Individual items and a mean experience score
Student Results: Question 2

“My prior training helped me to elicit patient questions and concerns that I would not otherwise have surfaced.”

Pre-training median = 60
Post-training median = 90
“The question listing process increased my understanding of the patient as an Individual.”

Pre-training median = 70
Post-training median = 90
Q2: Patient Results

“The question listing process surfaced questions and concerns that I would not otherwise have expressed.”

Pre-training median = 70
Post-training median = 90
Impact on Patients

Patients who participated in the study strongly agreed with the statement:

“The Question Listing process reduced my anxiety.”

Median score = 93
Results: From Pre- to Post-Training

• Students:
  • Elicited more questions
  • Saw patient as individual
  • Gained confidence
  • Overall skill improved

• Patients:
  • Asked more questions
  • Surfaced new questions
  • Felt less anxious
  • Better QL experience
Future Directions

• Benefit to medical students and patients
  • Larger sample size needed

• Potential benefit for providers?
  • Providers working with limited time
  • Trained parties can help
    promote communication

• Expanding the program
  • Incorporation into
    traditional curriculum?