LONGITUDINAL COMPETENCY IMPROVEMENT IN CRITICAL CARE FELLOWS TRAINED IN SERIOUS ILLNESS CONVERSATIONS

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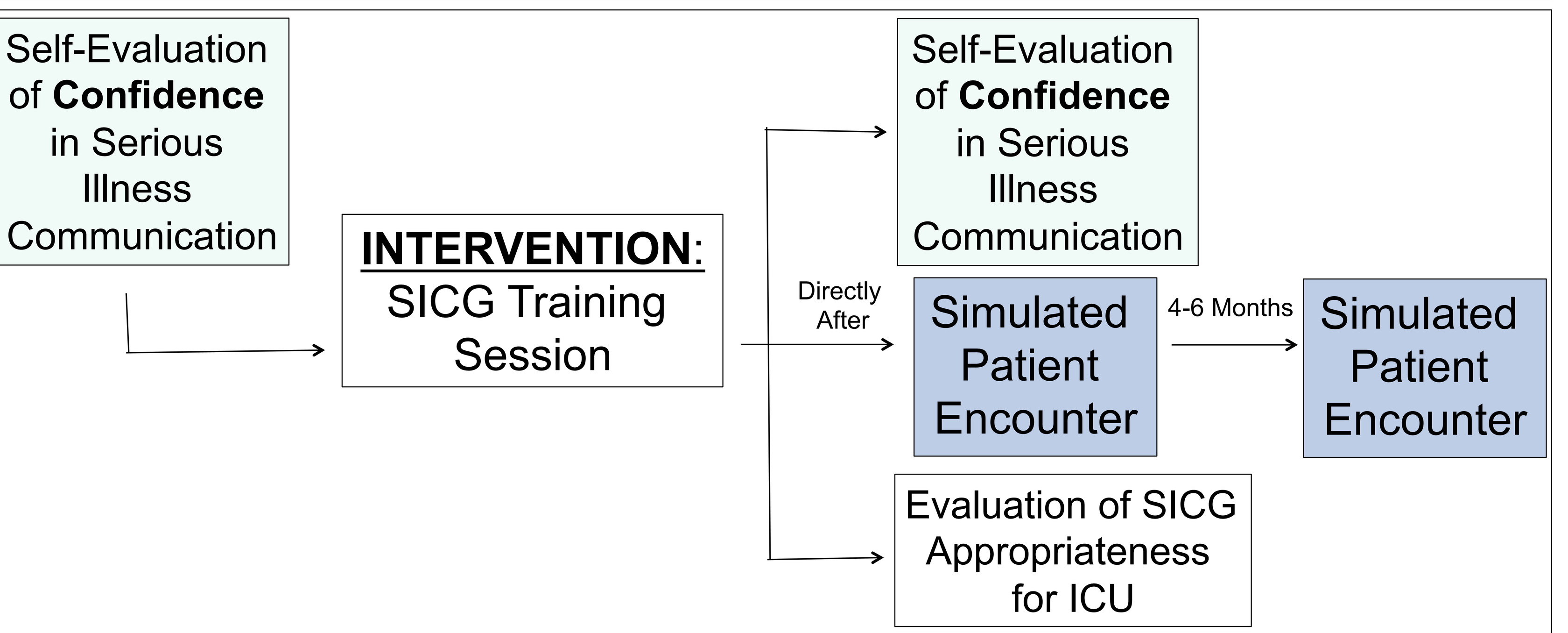
THE SERIOUS ILLNESS CONVERSATION GUIDE IS A BEST PRACTICE COMMUNICATION TOOL, NOT YET EVALUATED FOR CRITICAL CARE

- Early serious illness conversations are associated with better quality of life and better quality of dying.[1-3]
- Communication between critical care physicians and families is both crucial and unsatisfactory.[4-8]
- The ACGME requires all critical care programs to offer training in palliative care communication, yet few do.[9]
- Training of oncologists in the Serious Illness Conversation Guide (SICG) leads to better, earlier and more frequent serious illness conversations.[10, 11]
- SICG training has not been evaluated for critical care physicians.

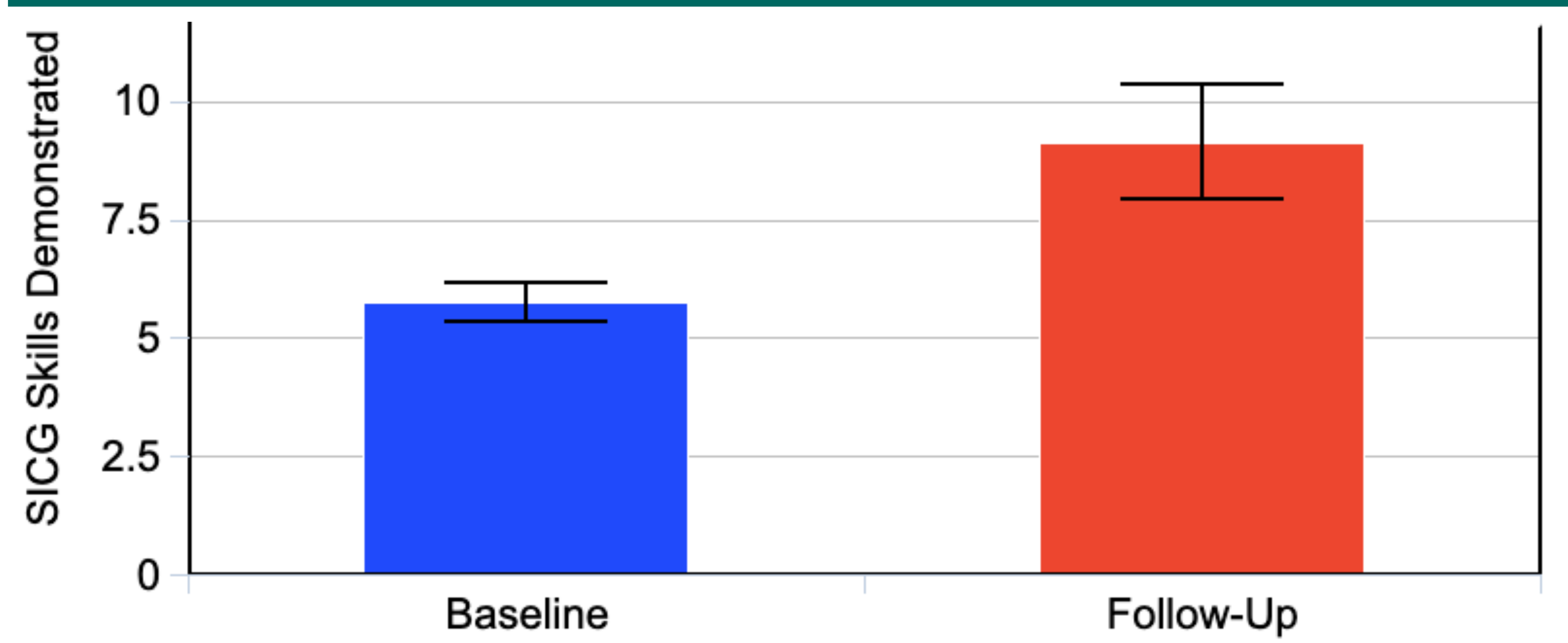
STUDY DESIGN: EVALUATION OF SICG TRAINING FOR CRITICAL CARE FELLOWS



PARTICIPANTS: 12 CRITICAL CARE FELLOWS

Characteristic		% (n)
Sex	Male	75% (9)
	Female	25% (3)
Fellowship Type	Pulmonary	33% (4)
	Anesthesiology	33% (4)
	Medicine	33% (4)
Medical School Training Location	United States	58% (7)
	International	42% (5)
Race/Ethnicity	White	50% (6)
	Asian/Pacific Islander	50% (6)
Age, median (range)		34 (30-40)
PGY, median (range)		5 (4-6)

RESULTS: CCS FELLOWS LONGITUDINALLY RETAIN COMPETENCY IN SICG SKILLS IN SIMULATED ENCOUNTERS



Baseline		4-6 Month Follow-up		Follow-up Versus Baseline		
Mean	Range	Mean	Range	Mean Difference	95% CI	P-value
5.8	4-8	9.1	5-17	3.4	0.12 to 6.6	**P = 0.04381**

RESULTS: IMPROVED FELLOW CONFIDENCE IN SICG SKILLS

Confidence in…	Prior to training	Directly post-training	Mean Difference	P-Value	n
Setting up a conversation talking about values and goals	3.2	4.5	1.3	P = 0.001	12
Focusing on values and goals instead of treatment options	2.9	4.2	1.3	P = 0.0007	12
Responding to emotion	2.5	4.1	1.6	P = 0.0001	11
Making a recommendation based on a patient's/surrogate's values and goals	3.1	4.2	1.1	P = 0.002	12

Fellow self-evaluation though 5-point Likert scale

RESULTS: FELLOWS AND FACULTY INDICATE SICG APPROPRIATENESS FOR CRITICAL CARE

- 92% (n=12) of fellows and 88% (n=8) of faculty indicated the training was "highly likely" to change their clinical practice
- 83% (n = 12) of fellows and 88% (n = 8) of faculty indicated they learned "a lot" of new ways to discuss prognosis
- 100% of fellows and faculty (n = 20) indicated they would personally use the SICG in clinical practice at least "several times a month"

DISCUSSION: IMPLICATIONS FOR CRITICAL CARE COMMUNICATION TRAINING

- A single SICG training session of critical care fellows allows for long-term skill retention and improvement in frequency of SICG skill use in simulated encounters.
- The one-day SICG training shows similar improvements in fellow confidence and communication skills as other studies involving a 12-month curriculum.[12]
- Future studies will measure longitudinal changes in fellow bedside communication and family-reported outcome measures to further investigate the efficacy of SICG training on patient care in the critical care environment.

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