

Professional Communication Skills among House Job Interns in Public Sector Teaching Hospital of Karachi

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Abstract

Background: In hospital, doctors have to deal with emergencies and challenging situations. Effective communication often empowers them to manage those situations tactfully. Hence it is very important to assess the professional communication skills of young doctors of the public sector teaching hospitals.

Objective: To determine the quality of professional communication skills and their relation with clinical departments among the house job interns of public sector teaching hospital.

Study type, settings & duration: This analytical cross-sectional study was conducted in Dr. Ruth K.M. Pfau Civil Hospital, Karachi during one month from 1st to 30th March 2021.

Methodology: This study of one month duration was conducted on 108 house job interns who had completed their one year house job at Dr. Ruth K.M. Pfau Civil Hospital, Karachi in various clinical departments including General medicine, Surgery, Psychiatry and Gynecology. A self-administered, validated questionnaire, Health professional communication skills scale (HP-CSS) was used to assess the quality of communication skills of house job interns. After taking informed consent an equal number of male and female interns were enrolled to assess their communication skills.

Results: The mean age of 108 study participants was 24.6±0.9 years. Overall their mean communication skills score on HP-CSS was 83.98±10.27. These scores in relation to General medicine and surgery, Psychiatry and Gynecology-Obstetrics departments were 83.7 (77.5%), 87.2 (80.7%) and 79.1 (73%) respectively. Overall gender difference was significant, male interns scored higher 86 (79.7%) as compared to females 81.8 (75.7%).

Conclusion: The house job interns who worked in the psychiatry department had significantly better communication skills than that of other departments of the same tertiary care hospital. Further male doctors have better communication skills than female. However, to reinforce the effectiveness of those skills, these need to be taught and examined by their clinical teachers throughout their training period.

Key words: Clinical, communication skills, health, internship, professional.

Introduction

Patient doctor communication is an essential skill when it comes to health professional practice. It is like the building block which helps in constructing a professional relationship with the

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Authors Contribution

AH conceptualized the project and did the data collection. AH, A & UJ did the literature search. UJ, AR & SK performed the statistical analysis. Drafting, revision & writing of manuscript were done by all authors.

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patient. If the patient does not properly understand the information, then communication is said to be ineffective. Communication is basically the two-way process that includes verbal and nonverbal i.e. voice tone, eye contact, facial expressions or body language. Both types of communication i.e. verbal and non-verbal helps out in multiple ways in the healthcare system to improve and encourage treatment compliance by establishing cordial relationship with severely ill patients and respective families, to break bad news and help them cope with it, dealing with anger and to build a good working relationship with colleagues.¹⁻² Communication plays an important role, especially in challenging situations such as breaking bad news, disclosing terminal illness or chronic pain, unfavorable prognosis, death of loved ones, assessment of forensic history, sexual history,

psychoactive substance use and ethical dilemmas in making treatment-related decisions.³ Hence, health professional's main aim should be to enhance a patient's health and medical care via appropriate communication practice.⁴ Such practice has been linked with many positive outcomes that include better treatment adherence, patient satisfaction, symptoms improvement, decreased psychological distress and further patient perception of doctor's competence.⁵ Effective communication is one of the essential skills in delivering healthcare services as its absence negatively impacts the quality of healthcare service provision.⁶ Effective communication bond between doctors and patients plays an important role to help them identify and understand their condition and associated issues.⁷

On the contrary, ineffective communication is more likely to negatively impact patient's compliance.⁸ Suppose a physician makes eye contact less often, asks fewer questions or the patient faces difficulty comprehending the doctor's language or writing. In that case, these conditions may negatively influence patient trust in the doctor, eventually causing the decline in treatment adherence.⁹ Certain identified factors may also lead to ineffective communication like patient's fear or anxiety, medical practitioner workload, fear of abuse, physical or verbal, unrealistic expectation of patient and fear of lawsuit.¹⁰

Makaryus et al. worked on the indicating factors of ineffective communication skills among physicians and found that only less than half of hospitalized patients could identify medication names and their diagnoses at discharge.¹¹ This indicates a need for the training of medical staff to improve communication skills, which may set the ground for satisfying doctor-patient relationships, which eventually will improve patient's adherence to medical advice and the lifestyle changes suggested by the practitioner. In addition to this, many complaints and legal problems against doctors mention poor communication as the leading reason for patient's grievances.¹² One of the leading causes of patient dissatisfaction is poor communication among doctors compared to any other professional lacking.¹³

Therefore, training health care professionals to improve communication skills may be potentially cost-effective as it will help in increasing compliance that leads to improvement in patient's health in general.¹⁴ This study is an initial step in this direction to assess the professional communication skills of house officers deployed in the tertiary care hospital of Karachi, which serves as the center for the provision of medical aid to thousands of people every day who visit from all over Pakistan. The

House officers (interns) are the targeted population because house job (internship) training is being considered as the initial training period when they learn and practice professional clinical skills while dealing with the patients directly under supervision. Thus, in current training programs of house officers, communication skills, among many other skills, must emphasize upon. However, not many research studies have been conducted in Pakistan, focusing and gauging the effectiveness of professional communication skills training of house officers. This study results can help to further design and modify training programs to enhance house officer's professional communication skills.

Methodology

This analytical cross-sectional study was conducted in Dr Ruth K.M. Pfau Civil Hospital Karachi during one month from 1st to 30th March 2021. The study Participants were the house job interns who have recently completed their one year house job (compulsory clinical internship after completing MBBS to get registered as a medical practitioner by Pakistan Medical Council). They were selected from the clinical departments including General medicine, surgery, Psychiatry and gynecology of the hospital through nonprobability purposive sampling technique. The sample size for this study was calculated by setting the confidence interval (two sided) for input data 95% with the power of 80%¹⁵ was 108 with equal division in two groups for male and female i.e,54.

After getting approval from Dr. Ruth K.M. Pfau Civil Hospital, Karachi, the principal investigator obtained the list of intern's allocations from the In-Charge House job branch of the hospital. The interns were approached individually after taking their informed verbal consent, a self-administrated validated questionnaire "Health professional communication skills scale (HP-CSS)" was given to them to assess the quality of their communication skills. The filled proforma were received after assuring their completion.

Interns with in the age range of 22-30 years and of either gender, who have recently completed one-year duration of house job (1st April 2020 till 31st March 2021) from the Dr Ruth K.M Pfau Civil Hospital, Karachi were included while interns who had not completed their full house job from the same hospital were excluded. A pretested and validated tool "Health professional communication scale (HP-CSS)"¹⁶ – was used as study instrument in this study and it has two parts, the initial part is related to demographic details, and the later one is the health professional communication scale (HP-

CSS). This scale is composed of 18 items, with a Likert-type rating response of 1-6, where "Almost never = 1, once in a while = 2, sometimes = 3, normally = 4, very often = 5, and, many times = 6;" However, two items (16 & 18) were reverse scored where, "Almost never = 6, once in a while = 5, sometimes = 4, normally = 3, very often = 2, and, many times = 1". It has total score of 108, greater scores reflect better communication skills. It includes four subscales; 1- *Informative Communication*: consisting of six items (5, 8, 9, 14, 17, and 18) that reflected the manner by which the house officers gain and provide information in the clinical relationship which they establish with patients. 2- *Empathy*: composed of five items (2, 4, 6, 11, and 12) that reflected the capability of the house officers to comprehend the feelings of patients and make empathy evident in the relationship, as well as the behavioral dimension, and the empathic attitude, composed of active listening and empathic response. 3- *Respect*: with three items (1, 3, and 15) that evaluated the respect that is shown by the house officer's in the clinical relationship they establish with patients. 4- *Social Skill*: with four items (7, 10, 13, and 16) that reflected the ability of the house officers to be assertive or to exhibit socially skillful behaviors in the clinical relationship they establish with patients.

The data was analyzed using Statistical Package for Social Sciences (SPSS) version 21. The mean and standard deviation was calculated for age, total HP-CSS scores and its subscale scores, social skills scores, respect scores, informative communication scores and empathy scores. While the frequency was calculated for gender and other socio-demographic variables such as graduating institute, batch, marital status, type of family (nuclear/joint/separate in hostel), other part-time job and house job departments. Post stratification, the Chi-square test was applied, and *p*-value of <0.05 was considered as significant. The independent sample *t*-test and one way ANOVA were applied on HP-CSS subscale scores in relation to gender and clinical departments, respectively.

The ethical approval was obtained from Institutional Review Board of Dow University of Health Sciences, Karachi.

Results

Total 108 house job interns were enrolled and half of them were male and half were female. The mean age of the participants was 24.6±0.9 years with the age range of 22 to 30 years. The majority of the participants were single 87 (81%). About 63 (58.3%) participants were living in a

nuclear family setup, 41 (38%) were living in a joint family setup, and 4 (3.7%) participants were residing in the hostel. The largest population 88 (81.5%) of this study graduated from Dow University of Health Sciences, and the rest of the 20 (18.5%) participants were from other medical colleges/universities.

House job interns enrolled were general medicine and surgical departments 49 (45.4%) psychiatry 37 (34.3%) and gynecology 22 (20.4%). Only 20 (18.5%) participants had ever attended a seminar on communication skills, and 88 (81.5%) participants had never attended such seminar or training (Table-1).

Table 1: Demographic characteristics of the study participants.

Variables	n (%)	Mean of HP-CSS Scale (SD)
Total no. of participants	108	83.98±10.27
Age, mean±SD	24.6±0.9years	-
<i>Gender</i>		
Male	54 (50)	86.1 (10.4)
Female	54 (50)	81.8 (9.80)
<i>Marital status</i>		
Single	87 (80.5)	83.7 (10.2)
Married	20 (18.5)	85.2 (10.7)
Divorced	1 (0.9)	77.0
<i>Type of family</i>		
Nuclear	63 (58.3)	84.3 (10.4)
Joint	41 (38.0)	83.6 (10.2)
Separate in hostel	4 (3.7)	82.8 (11.9)
<i>Graduating institute</i>		
Dow Medical College	88 (81.5)	83.6 (10.0)
Others	20 (18.5)	85.7 (11.5)
<i>House job departments</i>		
Medicine /Surgery	49 (45.4)	83.7 (10.3)
Psychiatry	37 (34.3)	87.2 (9.27)
Gynecology	22 (20.4)	79.1 (10.2)
<i>Previously attended communication skills seminar</i>		
Attended	20 (18.5)	84.8 (8.15)
Non-attended	88 (81.5)	83.8 (10.7)

Overall, the mean score of interns on HP-CSS was 83.98±10.27. The result of each subscale yields the findings of 17.55 ± 2.66 out of 24, 14.38 ± 2.40 out of 18, 28.75± 4.06 out of 36, 23.28±3.81 out of 30 for the domains of social skills, respect, informative communication, and empathy, respectively.

Independent sample *t*-test was computed to compare the gender difference on the scores of HP-CSS of house job interns. There was statistically significant gender difference found on the overall HP-CSS scores (*p* =0.029). However the subscale analysis confined that difference to selective domains of HP-CSS scale. The male interns scored

significantly better on HP-CSS subscale of “Respect” and “Informative communication skills” than that of females. While the difference in “Social skills and “Empathy scores” remained statistically insignificant (Table-2).

Table 2: Gender difference of participants on HP-CSS.

Gender	Mean (\pm SD)	t (106)	p value
HP-CSS (Total scores)			
Male	86.12 (10.37)	2.211	.029*
Female	81.83 (9.80)		
Social skills scores			
Male	17.74 (2.29)	.721	.472
Female	17.37 (2.99)		
Respect scores			
Male	14.88 (2.40)	2.198	.030*
Female	13.88 (2.32)		
Informative communication scores			
Male	29.66 (4.08)	2.395	.018*
Female	27.83 (3.86)		
Empathy scores			
Male	23.83 (3.90)	1.497	.137
Female	22.74 (3.67)		

*p < .05

In order to analyze the communication skills scores of house job interns working in the different clinical departments, the departments were broadly grouped into three units; medicine and surgery (included those house job interns who did either full house job from general medicine and surgery departments or allied departments beside Gynecology and Psychiatry), Psychiatry (Included those interns who did house job in psychiatry with general medicine and general surgery except gynecology) and Gynecology and obstetrics (included those interns who did house job in Gynecology and Gen surgery and general medicine and allied departments except Psychiatry). One-way ANOVA (Table-3) was computed to compare the HP-CSS scores of these house job interns working in those three units. A statistically significant difference was found among the communication scores of the three groups ($F(2,105) = 4.582, p = 0.012$). Further Post hoc comparison using the Tukey test revealed significantly high scores of interns who worked in the psychiatry department

($M=87.21, SD=9.27$) as compared to interns who worked in gynecology department ($M=79.13, SD=10.23$). Putting together, the result of our analysis suggests that the interns working in the Psychiatry Department of Dr Ruth K.M Pfau Civil Hospital, Karachi had significantly better communication skills than the interns working in other studied departments of the same tertiary care hospital.

Discussion

Providing effective communication skill training during initial years of the MBBS course is a challenging task. However, during clinical posting, such training leads students to observe the relevance and implication of those skills in practice. In public sector teaching institutes, medical interns usually develop their communication skills during clinical posting by observing their teachers and seniors.¹⁷ The findings of the present study indicated a difference in the professional communication skills scores of interns working in psychiatry, general medical-surgical and gynecology departments. The interns of the gynecology department were appeared with deficit of professional communication skills as compared to psychiatry interns.

The findings of the present study contradict with another research conducted in the context of Iran that reveals no significant relationship between doctor-patient communication scores and types of medical departments.¹⁸ The overall trend of insufficient communication skills among medical interns could be attributed to an organizational culture that is one of the important factors that influences professional communication skills among medical practitioners.¹⁹ It is also observed that in developing countries, health care physicians work under great time pressure,²⁰ such as Dr. Ruth K.M. Pfau Civil Hospital, Karachi is one of the largest public sector hospitals with immense patient’s load. Moreover, there is no culture of making the appointment, but the walk-in trend is being followed. Patients have to wait for many hours under long queues for their turns. On the other hand,

Table 3: Analysis of variance for total score and sub-scales of HP-CSS with respect to different departments.

	Gynecology		Psychiatry		Medicine/Surgery		F (2, 105)	η^2
	Mean	\pm SD	Mean	\pm SD	Mean	\pm SD		
HP-CSS Total	79.1	10.23	87.2	9.27	83.7	10.31	4.58**	.080
Social skills	17.0	3.34	17.6	2.34	17.7	2.58	.608	.011
Respect	13.4	2.42	15.1	2.20	14.3	2.41	4.03*	.071
Informative Communication	27.3	4.13	30.0	4.04	28.5	3.86	3.37*	.060
Empathy	21.5	3.96	24.5	3.66	23.2	3.61	4.44**	.078

*p < .05, ** p < .01

physicians barely give quality time to patients because of the limited time frame that makes it difficult to communicate in an adequate way.

However, the mean score of the present study suggests reasonably good communication skill scores of psychiatry ward interns ($M=87.21$, $SD=9.27$). Professional communication skills are essential in all domains of the medical profession. But in psychiatry, it is a core skill that plays a central role in diagnosing a disorder and administering therapeutic intervention. In psychiatry, it is the basic requirement to use effective communication skills such as empathy, emotional understanding and rapport building to communicate with patients suffering from mental illness.²¹⁻²² That's why it could be acknowledged that psychiatry interns differ from other medical departments in terms of learning effective communication skills.

On the other hand, present research findings also reveal insufficient professional communication skills of medical interns working in the gynecology department (79.1 ± 10.2). These findings are consistent with many other researches. They also found obstetrics and gynecology medical interns at a downtrend of doctor-patient communication as compared to other clinical departments.²³ The reason for this deficit in the professional communication skills of the gynecology department is manifold. First, this department faces too much work pressure and a shortage of time that do not let consultants implement effective communication skills on patients. Secondly, the primary focus of training in the gynecology department is on learning technical or interventional medical and surgical skills rather than effective communication. Consequently, the health professionals there lack the skills to identify, address and deal with the psychosocial and emotional needs of their patients. Recent international and local research evidences on trainees of the gynecology department also support the present study finding that stressful work environment and inadequate communication are the key factors that are affecting patients in negative way.²⁴⁻²⁶

Apart from departmental disparity in the scores, male interns scored significantly high ($p < .05$) on HP-CSS as compared to females. Further subscale analysis of HP-CSS indicated significantly elevated scores of males on "Respect" and "Informative Communication skills" subscales. No significant difference was observed on the domain of "Social skills scores and "Empathy score". These findings are inclusive of our research that support male interns as better in professional communication skills.²⁷ However, communication

skill in terms of gender difference is surrounded with diverse findings across the globe. Such as, a study conducted on final year medical students of Japan does not find any significant difference in the communication skills of males and females.²⁸ While few researches yield the finding that male medical interns display more confidence while communicating with patients as compared to females.²⁹ The inverse findings of gender difference with respect to communication skill could be attributed to questionable authenticity of present study results. This factor was well studied by Gude et al.³⁰ in their research that investigated the communication skills among medical interns by using two measures, i.e. self-reported questionnaire and observer checklist. Findings indicated an inverse relationship between both measures of communication skills among medical interns. On self-reported measures, male interns rated themselves better in communication skills than females. Whereas female interns performed better on the observer checklist as compared to males and showed low self-efficacy in communicating with patients.³⁰

It could be inferred that one of the major limitations of this study is the external validity or generalizability of findings because data was collected from only one public sector hospital in Karachi. There could be chances of biased self-assessment as well on the part of interns because interns were not directly observed or interviewed by the researcher using a valid checklist of effective communication skills. Apart from these few limitations, the major strength of the present study is that it is among one of few local studies that place emphasis on the importance of teaching communication skills to medical students, preferably before and necessarily during their clinical internship. However, it is a challenging and difficult task for public sector medical institutions and universities, especially in middle and low-income countries where there is patient bulk and scarcity of resources. In the realm of the current pandemic crisis where huge transformation has occurred in the education delivery system from traditional to virtual(online) and due to lack of adequate technical resources, both the students as well the teachers have been affected. It is recommended to assess the communication skills of interns working in private and public sector hospitals with the availability of present resources and to compare them in terms of identification of risk factors and deficit areas before devising any compulsory course or training on enhancing professional communication of young doctors. Because it is an essential role of the stakeholders and ultimately the

teachers to embed the formal communication skill training and assessment in the curriculum of medical courses so that the overall health care quality of the system may improve.

This study suggests that the house job interns who worked in the psychiatry department had significantly better communication skills than that of other departments of the same tertiary care hospital. However, to reinforce the effectiveness of those skills, these have to be taught and practiced consistently in each clinical department of the institute, and also to be examined by their clinical teachers. The teaching methods and ways of teaching must also need to be updated with the needs of the students. The faculty growth training, availability of technical assistance and resources must be ensured by the teaching institute.

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