Veterinary Medical Education
Communication Skills and Leadership

Annotated Bibliography

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Adam, C. L., & Kurtz, S. M. (2006). Building on Existing Models from Human Medical Education to Develop a Communication Curriculum in Veterinary Medicine. *Journal of Veterinary Medical Education, 33*(1), 28-37.

ABSTRACT

Communication is a core clinical skill of veterinary medicine and one that needs to be taught and learned to the same degree as other clinical skills. To provide this education and essential expertise, veterinary schools in many countries, especially including North America, the United Kingdom, and Australia, have begun to develop programs and communication curricula. Human medical education, however, has 30 years' experience in developing communication curricula, and is thus an excellent resource upon which veterinary educators can build and shape their own communication programs. This article describes a skills-based communication course that has been successfully implemented for veterinary medical education at Ontario Veterinary College (OVC) and was based on the University of Calgary Faculty of Medicine's well-established program. The Calgary-Cambridge Guides and supporting textbooks provide the scaffolding for teaching, learning, and evaluation in both programs. Resources such as space and materials to support the OVC program were also patterned after Calgary's program. Communication skills, and the methods for teaching and learning them, are equally applicable for the needs of both human medicine and veterinary medicine. The research evidence from human medicine is also very applicable for veterinary medicine and provides it the leverage it needs to move forward. With this extensive base available, veterinary medicine is in a position to move communication skills training forward rapidly.

Adams, C. L., Nestel, D., & Wolf, P. (2006). Reflection: A Critical Proficiency Essential to the Effective Development of a High Competence in Communication. *Journal of Veterinary Medical Education, 33*(1), 58-64.

ABSTRACT

Reflection, or the ability to step back from an experience and consider it critically, in an analytical, non-subjective manner, is an essential aspect of problem solving and decision making, and also of effective communication with clients and colleagues. Reflective

practice has been described as the essence of professionalism and is therefore a core professional skill; rarely, however, has it been explicitly taught in veterinary curricula, and it has only a recent history in undergraduate human medical curricula. We describe here two preliminary case studies, one in a veterinary medical education context and the other within a human medical education framework, as examples of approaches to assessing a student's ability for ''reflection.'' The case studies also illustrate some of the key principles. Both of the case studies described had as their end goal the enhancement of communication skills through critical reflection. At Monash University, Australia, the majority of students were assessed as being at a level of ''reflection in development.'' The students in the Ontario Veterinary College case study showed moderately good use of self-awareness and critical reflection as a basis for modifying and integrating communication skills into practice. While both preliminary case studies point to the fact that students recognize the importance of communication and value the opportunity to practice it, few students in either case study identified the importance of reflection for lifelong learning and professional competence. Opportunities to complete critical reflection exercises in other parts of curricula and outside of communication would likely reinforce its importance as a generic skill. Ongoing scholarly approaches to teaching, learning, and evaluating reflection and self-awareness are needed.

Ballance, D. W., Brenson, P. R., & Aldrich, J. (2006). The Electronic Medical Record: Medical Records That Teach Communication Skills. *Journal of Veterinary Medical Education, 33*(1), 81-84.

Since 1985, the Veterinary Medical Teaching Hospital (VMTH) at University of California, Davis has used the hospital information system (HIS) to provide easy and timely access to medical, surgical, laboratory, radiographic, demographic, and financial information in a patient-oriented, integrated format. Over time, the HIS has expanded to include pharmaceutical and supply information as well as images, clinic schedules, and evaluations. The HIS has evolved to become a comprehensive computerbased system that provides information to care for patients; teach students and residents and evaluate their skills, knowledge, and professional attributes; perform clinical research; support continuing education and service to the community; and administer the hospital. The core of the HIS is the patient-oriented electronic medical record (EMR). Besides serving the traditional function of the patient record as a repository for all-important patient information, the EMR is now a primary tool for teaching critical thinking and communication skills to students and residents.

Blumberg, P. (2005). Why Self-Directed Learning Is Not Learned and Practiced in Veterinary Education. *Journal of Veterinary Medical Education, 32*(3), 290-295.

ABSTRACT

Veterinary education as it is frequently implemented creates numerous impediments for the majority of students to achieve self-directed learning. Self-directed learning is a state

in which the student is prepared to engage in learning activities defined by him- or herself. Essential components of veterinary education (i.e., curriculum and assessment) inhibit the development of self-directed learning in many ways. This article will make suggestions on how we can promote self-directed learning within traditional veterinary education and discuss how teaching based upon the principles of problem-based learning (PBL) may foster self-directed learning.

Bonvicini, K. A., & Keller, V. K. (2006). Academic Faculty Development: The Art and Practice of Effective Communication in Veterinary Medicine. *Journal of Veterinary Medical Education, 33*(1), 50-57.

In veterinary practice, as in other medical professions, effective communication skills have been recognized as one of the main tasks in delivering comprehensive medical care to clients and patients. Over the past few years, several authors have discussed the importance of interpersonal skills in veterinary care, supporting the premise that successful practice requires multiple skills, including communication. Given the growing importance of communication skills in outcomes of professional practice and customer service, providing veterinary students with a set of skills that can be taught, learned, and maintained with ongoing training and coaching is critical. Academic institutions are increasingly responsible to teach and assess their learners in this traditionally difficult area and have begun to consult the literature and experts in teaching strategies that are conducive to developing communications knowledge, skills, and attitudes. This article provides an overview of the response to addressing this learning need in veterinary medical education through the Bayer Animal Health Communication Project that has provided comprehensive training in the area of veterinarian–client communication for use in veterinary medicine curricula since 2002.

Brandt, J. C., & Bateman, S. W. (2006). Senior Veterinary Students' Perceptions of Using Role Play to Learn Communication Skills. *Journal of Veterinary Medical Education, 33*(1), 76-80.

ABSTRACT

Recent studies of veterinary practice have suggested a correlation between well-developed communication skills and job satisfaction, career retention, customer satisfaction, decreased lawsuits, and financial remuneration for veterinarians. Veterinary educators are under growing pressure to teach functional communication skills to veterinary students; however, the methods employed have not been well evaluated. In this study we have evaluated veterinary student's attitudes to learning communication skills by participating in role play. The study indicates that experiential learning modalities such as role play are perceived as effective by students, despite reluctance to participate and some discomfort surrounding participation.

Burns, G. A., Ruby, K. L., DeBowes, R. M., Seaman, S. J., & Brannan, J. K. (2006). Teaching Non-Technical (Professional) Competence in a Veterinary School Curriculum. *Journal of Veterinary Medical Education, 33*(2), 301-308.

ABSTRACT

Data from focused studies and comprehensive surveys suggest that developing or enhancing non-technical (professional) skills will result in a more satisfied and successful veterinary student or veterinary graduate. The College of Veterinary Medicine at Washington State University has devoted considerable time, effort, and resources to augmenting the nontechnical aspects of its curriculum while maintaining the traditional strengths of its DVM program. Here we summarize pertinent research and best-practice recommendations from a variety of sources and outline the steps that have been taken, with the underlying rationales, to integrate the teaching and modeling of non-technical (professional) competence throughout a four-year course of veterinary study.

Frankel, R. M. (2006). Pets, Vets, and Frets: What Relationship-Centered Care Research Has to Offer Veterinary Medicine. *Journal of Veterinary Medical Education, 33*(1), 20-27.

An extensive body of literature on the medical interview and related skills in human medicine already exists, and studies of communication in veterinary medicine are beginning to appear. Many opportunities and challenges remain in creating linkages between the two fields of medicine. Despite apparent differences in scope and focus, there are encouraging signs of overlapping methods and parallel findings in the area of communication and relationship building. It is clear that there is a great potential for synergy and for carrying collaborative efforts. This article provides an overview in three areas: (1) review of the need for communication skills training and research in veterinary medicine; (2) describe an evidence-based education and research model from human medicine that links elements of communication with processes and outcomes of care; and (3) suggest areas of future research in veterinary medicine with high potential for impact in changing veterinarians' communication skills and behaviors.

Gray, C. A., Blaxter, A. C., Johnston, P. A., Latham, C. E., May, S., Phillips, C. A., Turnbull, N., & Yamagishi, B. (2006). Communication Education in Veterinary Education in the United Kingdom and Ireland: The NUVACS Project Coupled to Progressive Individual School Endeavors. *Journal of Veterinary Medical Education, 33*(1), 85-92.

ABSTRACT

This article reports on the coordination of communications skills training in veterinary schools in the United Kingdom and Ireland and describes the progress and status of training that is occurring in six of these schools.

Klingborg, D. J., Moore, D. A., Varea-Hammond, S. (2006). What is Leadership? *Journal of Veterinary Medical Education, 33*(1), 280-283.

ABSTRACT

The demand for more effective leadership is heard throughout the health professions. Modern concepts of leadership differ from the traditional definition of a charismatic individual leader. Historically, leadership has been vested in positions, while today leadership is seen as a role one moves continuously into and out of, depending on the circumstance. Leadership ideas have evolved so that newer characteristics of leaders include being a team builder; possessing creative and strategic thinking skills; demonstrating honesty and integrity; and having the ability to motivate others to action. This article discusses some of the history of leadership, current thoughts on attributes of effective leaders, and the differences and similarities between leaders and managers; identifies selected teachable leadership tools; and describes various styles and purposes of existing leadership programs.

Kopcha, M., Lloyd, J. W., Peterson, F., & Dirkson, F. J. (2005). Practice-Based Education at Michigan State University. *Journal of Veterinary Medical Education, 32*(4), 555-561.

ABSTRACT

Practice-based large animal education at Michigan State University (MSU) was initiated in 1995. Urbanization of the area surrounding MSU and the declining number of livestock and farms to provide clinical experience under field conditions were the major reasons for adopting this educational model. Veterinary students, as a requirement for graduation from the professional program, must successfully complete a three-week clerkship in a private practice that has either a food animal or an equine emphasis. The objective of the practice-based program is to provide students with introductory on-the-farm experience, with emphasis on examination, diagnosis, treatment, and prevention of common medical and surgical conditions of horses and/or food animals. Participating practices must be located in Michigan, have a sufficient case load, be interested in teaching senior veterinary students, and be willing to interact with the program coordinator and attend annual meetings. Sixty-nine practices are currently participating. The program coordinator matches students to practices based on the students' species interest and background, the personalities of the student and practitioner, and any special concerns or needs of the students (health conditions, child care). Assessment of students includes a practitioner's performance evaluation and review of written assignments (case log, clinical case reports, and a practice management assessment report) by campus faculty. A pass/no pass grading system is used. Overall, the Practice-Based Ambulatory Program represents a successful model for meeting the clerkship objectives. Additionally, exposing students to a high volume of commonly encountered conditions in a private business setting complements the referral cases seen in our large animal teaching hospital.

Kurtz, S. (2006). Teaching and Learning Communication in Veterinary Medicine. *Journal of Veterinary Medical Education, 33*(1), 11-19.

ABSTRACT

Drawing on extensive evidence and experience in human medicine, this article offers a practical conceptual framework for thinking more precisely about how to teach and learn communication systematically and intentionally in veterinary medicine. The overarching goal is to promote the development of communication programs so as to improve communication in veterinary practice to a professional level of competence. A three-part conceptual framework is presented that first explores the rationale behind teaching and learning communication, including the evidence base regarding the impact of communication on clinician–client interactions and outcomes of care and the research on teaching and learning communication skills in medicine. The second part considers four ways to conceptualize what to teach and learn, as explicated by (a) the domains of communication in veterinary medicine; (b) ‘‘first principles’’ of effective communication; (c) evidence-based goals or outcomes for communication programs; and (d) delineation and definition of the specific individual skills that research evidence supports, as presented in the Calgary-Cambridge Guides. The last part of the conceptual framework examines how to teach communication, including the use of models, a primary focus on skill development as the backbone of communication programs, and the value of other methods supported by the evidence, such as simulated patients, videotape, small groups, and feedback and facilitation skills. Communication impacts the clinician–client interaction and outcomes of care in very significant ways. Communication can and should be taught and learned with as much rigor as other aspects of clinical competence. Veterinary programs at all levels should include the teaching of communication.

Magrath, C. (2006). A Conceptual Framework for Facilitator Training to Expand Communication-Skills Training among Veterinary Practitioners. *Journal of Veterinary Medical Education, 33*(1), 108-110.

This article describes a proposal for a program for veterinary surgeons in practice, based on the East Anglia Deanery Communication Skills Teaching Project. The program is dependent on training a cohort of skilled facilitators, who then become a resource for developing good-quality communication-skills teaching as part of the continuing professional development (CPD) of established general practitioners. Within this process, it is important for facilitators to improve their own communication skills, to develop a sound understanding of what to teach, to recognize the importance of utilizing research that validates the use of specific communication skills, and to develop and practice specific facilitation skills.

Martin, E. A. (2006). Managing Client Communication for Effective Practice: What Skills Should Veterinary Graduates Have Acquired for Success? *Journal of Veterinary Medical Education, 33*(1), 45-49.

According to this author, who has served 14 years as both Chair and Committee Advisor on the College of Veterinarians of Ontario, the single factor common to virtually all complaints comes from the difficulty with the effective communication that is required for the practice of veterinary medicine. This article provides an overview of the author's belief in the importance of communication in veterinary practice and the role poor communication plays in the genesis of such complaints.

Millman, S. T., Adams, C. L., & Turner, P. V. (2006). Animal Welfare Training at the Ontario Veterinary College. *Journal of Veterinary Medical Education, 32*(4), 447-450.

ABSTRACT

The University of Guelph is internationally recognized as a leader in animal welfare and is home to the Colonel K.L. Campbell Centre for the Study of Animal Welfare and to numerous faculty with expertise in the discipline. However, while animal welfare receives significant attention within the agricultural college, its didactic teaching within the veterinary curriculum has been limited. Veterinary students receive four hours of instruction in animal ethics and apply their knowledge within the communication lectures and laboratories, totaling 11–15 hrs. Compulsory coursework explicitly addressing factual components of animal welfare science, welfare assessment, and associated animal-related policy constitute only 12 hrs throughout the four-year Doctor of Veterinary Medicine curriculum. However, an elective final-year clinical rotation and a graduate course specific to animal welfare were offered for the first time in 2004/2005. Student interest in animal welfare is evident through their participation in summer research projects in animal welfare, an animal welfare mentor group, and a student-run animal welfare club that organizes an Animal Welfare Forum each October. Veterinarians have important contributions to make in decision making about animal welfare issues, at clinician and policy levels. Although motivated individuals can seek out opportunities to expand their knowledge of animal welfare, a compulsory senior-level course in animal welfare is needed to develop the necessary depth of understanding of this discipline if veterinarians, as a profession, are to meet society's expectations about animal welfare.

Mills, J. N. (2006). Development of Veterinary Communication Skills at Murdoch University and in Other Australian Veterinary Schools. *Journal of Veterinary Medical Education, 33*(1), 93-99.

ABSTRACT

A historical perspective of the development of interpersonal communication and consultation skills workshops within the veterinary curriculum at Murdoch University is presented, along with plans for the future in this area. Videos have been found to be valuable teaching tools for triggering discussion in workshops on communication issues and in reviewing real client consultations. More use could be made of role plays with actors involving challenging consultations, and changes in the curriculum could allow for aspects of professional and applied interpersonal skills to be incorporated at an earlier stage of the program. An overview of the professional communication programs in other Australian veterinary schools is also presented. Most programs involve interaction with veterinary practitioners and consultants such as counselors and psychologists, and most veterinary schools offer a program of professional development spanning five years of the curriculum.

Moore, D. A., & Klingborg, D. J. (2006). The University of California Veterinary Student Leadership Program: Comparison of a Five-Day with a Three-Day Course. *Journal of Veterinary Medical Education, 33*(2), 284-293.

ABSTRACT

Leadership skills can be learned and leadership activities can be stimulated with an effective educational program. The University of California, Davis, School of Veterinary Medicine has demonstrated and previously reported on the enthusiasm for and outcomes of their five-day leadership program for incoming veterinary students. The course was altered and again offered as a five-day program to the next veterinary class but, because of timing and limited resources, was reduced to three days the following year. Thirty students were accepted each year on a first-come first-served basis. This article compares the five-day and three-day program curricula and post-program evaluations. Although the students decided whether or not to participate, short-term effects of the programs were the introduction of a new vocabulary, improved confidence to become leaders, and stimulation of student participation in veterinary student leadership roles. A course like this can get students off to a good start, but it is very likely that to achieve a long-term effect, continued exposure throughout the veterinary curriculum is needed.

Shaw, D. H., & Ihle, S. L. (2006). Communication Skills Training at the Atlantic Veterinary College, University of Prince Edward Island. *Journal of Veterinary Medical Education, 33*(1), 100-104..

ABSTRACT

Communication skills are considered a core clinical skill in human medicine. Recognizing the importance of communication skills and addressing them in veterinary curricula, however, is just beginning. In the fall of 2003, the Atlantic Veterinary College, University of Prince Edward Island, markedly changed the way in which it approaches communication teaching. An intensive one-week elective rotation on client communication was offered in the senior year. This rotation made extensive use of experiential techniques through the use of role plays and videotaped real client interactions. A group of faculty and hospital staff members were trained as coaches to support students as they practiced their communication in various client scenarios. The skills taught were based on the Calgary-Cambridge Observation Guide, which outlines observable behaviors that contribute to effective medical communication. Student response to and feedback on the rotation have been very positive. As a result, the number of rotations given per year has been increased. Long-term plans include expanding communication skills teaching into other years of the DVM program and incorporating simulated clients into the teaching program. Challenges that lie ahead include the development of a fully integrated communication teaching program that spans the whole curriculum, addressing the ongoing need for the professional development of coaches, improving methods of student assessment, and recruiting/training a sufficient number of coaches.

Shaw, J. R. (2005). Four core communication skills of highly effective practitioners. *Veterinary Clinics of North America, Small Animal*, 385-395.

The author presents an overview of a set of core communication skills that have been correlated with health outcomes in the medical literature over the past four decades and provides several contexts and examples of how these skills are applicable to the practice of veterinary medicine.

Shaw, J. R., Bonnett, B. N., Adams, C. L., & Roter, D. L. (2006). Veterinarian-client-patient communication patterns used during clinical appointments in companion animal practice. *Journal of American Veterinary Medical Association, 228*, 714-721.

ABSTRACT

Objective—To identify communication patterns used by veterinarians during clinical appointments in companion animal practice.
Design—Cross-sectional descriptive study.

Sample Population—A random sample of 50 companion animal practitioners in southern Ontario and a convenience sample of 300 clients and their pets.
Procedure—For each practitioner, 6 clinical appointments (3 wellness appointments and 3 appointments related to a health problem) were videotaped. The Roter interaction analysis system was used to analyze the resulting 300 videotapes, and cluster analysis was used to identify veterinarian communication patterns.
Results—175 (58%) appointments were classified as having a biomedical communication pattern, and 125 (42%) were classified as having a biolifestyle-social communication pattern. None were classified as having a consumerist communication pattern. Twenty three (46%) veterinarians were classified as using a predominantly biomedical communication pattern, 19 (38%) were classified as using a mixed communication pattern, and 8 (16%) were classified as using a predominantly biolifestyle-social communication pattern. Pattern use was related to the type of appointment. Overall, 103 (69%) wellness appointments were classified as biolifestyle-social and 127 (85%) problem appointments were classified as biomedical. Appointments with a biomedical communication pattern (mean, 11.98 minutes) were significantly longer than appointments with a biolifestyle-social communication pattern (10.43 minutes). Median relationship-centered care score (ie, the ratio of client-centered talk to veterinarian-centered talk) was significantly higher during appointments with a biolifestyle-social communication pattern (1.10) than during appointments with a biomedical communication pattern (0.40).
Conclusions and Clinical Relevance—Results suggest that veterinarians in companion animal practice use 2 distinct patterns of communication. Communication pattern was associated with duration of visit, type of appointment, and relationship-centeredness. Recognition of these communication patterns has implications for veterinary training and client and patient outcomes.

Strand, E. B. (2006). Enhanced Communication by Developing a Non-anxious Presence: A Key Attribute for the Successful Veterinarian. *Journal of Veterinary Medical Education, 33*(1), 65-70.

ABSTRACT

In the recent past much has been written about non-technical skills in veterinary medical education. This dialogue has focused extensively on competence in behaviorally based communication skills for successful veterinary practice. Other relationship-based communication skills are also useful in communication, such as self-awareness, flexibility, non-judgment (compassion), and being present. All of these relationally based skills are present in the concept of non-anxious presence. This article will review the history of the term ‘‘non-anxious presence’’ (NAP), discuss a proposed model of NAP for the veterinary medical environment, and review some methods useful in teaching NAP in veterinary medical education.

Timmins, R. P. (2006). How Does Emotional Intelligence Fit into the Paradigm of Veterinary Medical Education? *Journal of Veterinary Medical Education, 33*(1), 71-75.

ABSTRACT

The term ‘‘emotional intelligence’’ (EI) has become very popular in the business world and has recently infiltrated veterinary medical education. The term purports to encompass those qualities and skills that are not measured by IQ tests but do play an important role in achieving success in life. Veterinary medical educators often incorporate these in a category called ‘‘non-technical competencies’’ (which includes, for example, communication skills) and acknowledge that veterinarians need more training in this area in order to be successful. Although EI looks promising as a means for teaching these non-technical competencies to students and practitioners, there are some challenges to its application. To begin with, there are three competing models of EI that differ in definition and measuring instruments. Although some research has suggested that high EI is associated with success in school and in business, there are no studies directly correlating high EI with greater success in the veterinary profession. Nor have any studies confirmed that increasing a student’s EI will improve eventual outcomes for that student. It is important that educators approach the implementation of new techniques and concepts for teaching non-technical competencies the same way they would approach teaching a new surgical technique or drug therapy. EI is an intriguing and promising construct and deserves dedicated research to assess its relevance to veterinary medical education. There are opportunities to investigate EI using case control studies that will either confirm or discredit the benefits of incorporating EI into the veterinary curriculum. Implementing EI training without assessment risks wasting limited resources and alienating students.