

## Teaching the Psychosocial Aspects of Care in the Clinical Setting: Practical Recommendations

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### Abstract

Communication skills and the psychosocial dimensions of patient care are increasingly taught in medical schools and generalist residency programs. Evidence suggests they are not reinforced or optimally implemented in clinical training. The authors present the product of an iterative process that was part of a national faculty development program and involved both experts and generalist teachers concerning teaching psychosocial medicine while precepting medical students and residents in clinical settings. Using scientific evidence, educational theory, and experience, the authors developed recommendations, presented them in workshops, and revised them based on input from other experts and

teachers, who gave feedback and added suggestions. The results are practical, expert consensus recommendations for clinical preceptors on how to teach and reinforce learning in this area. General skills to use in preparing the trainee for improved psychosocial care are organized into the mnemonic "CAARE MORE": Connect personally with the trainee; Ask psychosocial questions and Assess the trainee's knowledge/attitudes/skills/behaviors; Role model desired attitudes/skills/behaviors; create a safe, supportive, enjoyable learning Environment; formulate specific Management strategies regarding psychosocial issues; Observe the trainee's affect and behavior; Reflect and provide feedback on doctor-

patient and preceptor-trainee interactions; and provide Educational resources and best Evidence. The preceptor-trainee teaching skills that are recommended parallel good doctor-patient interaction skills. They can be used during both preceptor-trainee and preceptor-trainee-patient encounters. Important common psychosocial situations that need to be managed in patients include substance abuse, depression, anxiety, somatoform disorder, physical and sexual abuse, and posttraumatic stress disorder. For these problems, where high-level evidence exists, specific psychosocial questions for screening and case finding are provided.

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**P**rofessionalism and humanistic communication skills are core competencies for physicians.<sup>1-3</sup> Increasingly, residency programs will be required to document that their graduates attain these competencies.<sup>4</sup> Effective methods have been developed for teaching humanistic communication skills and approaches to patient care<sup>5-8</sup> and are used in many medical schools and residency programs.<sup>9,10</sup> However, the knowledge, skills and attitudes taught in targeted curricula are often neither modeled nor reinforced in clinical settings,<sup>10-12</sup> and humanistic attitudes and behaviors may become attenuated or extinguished.<sup>13-15</sup> As part of this problem, well-meaning clinical preceptors may fail to recognize opportunities for teaching the psychosocial aspects of patient care,<sup>16</sup> and may inadvertently model<sup>12,17,18</sup> or fail to address<sup>19</sup> negative attitudes and behaviors.

With these issues in mind, we developed the recommendations proposed in this article, after refining them with other experts and with generalist teachers. The recommendations are designed to help preceptors teach, reinforce, and promote the application of humanistic

approaches in the care of patients in busy clinical settings. We use the shorthand term "TIPS" for these recommendations; we use it both in the normal sense of the word *tips*, as items of advice, and as an acronym to connote the context for that advice, teaching in the patient setting. *Humanistic care* is defined as being patient-centered and integrating the psychosocial with the biomedical aspects of care. Those who practice humanistic care demonstrate interest in and respect for individual patients and address their values, concerns, and emotional, social, cultural and spiritual needs. Such care improves information-gathering and promotes accurate diagnoses,<sup>4,20-23</sup> increases patients,<sup>4,24-26</sup> and physicians,<sup>27-29</sup> satisfaction, decreases the likelihood of malpractice litigation,<sup>30</sup> and improves important clinical outcomes such as adherence with medication.<sup>24,30-32</sup> It addresses psychosocial problems, which are common in medical patients, frequently go unrecognized, are associated with increased medical utilization, and affect the management and outcomes of patients' medical problems.<sup>4,24</sup>

# Teaching Psychosocial Aspects Of Patient

**Marco Cascella**



## **Teaching Psychosocial Aspects Of Patient:**

This book delves into Teaching Psychosocial Aspects Of Patient. Teaching Psychosocial Aspects Of Patient is a crucial topic that must be grasped by everyone, from students and scholars to the general public. This book will furnish comprehensive and in-depth insights into Teaching Psychosocial Aspects Of Patient, encompassing both the fundamentals and more intricate discussions.

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  6. In chapter 5, this book will draw a conclusion about Teaching Psychosocial Aspects Of Patient. The final chapter will summarize the key points that have been discussed throughout the book.
- This book is crafted in an easy-to-understand language and is complemented by engaging illustrations. It is highly recommended for anyone seeking to gain a comprehensive understanding of Teaching Psychosocial Aspects Of Patient.

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