Case 13
Rarely involves families in plan and/or does not engage well with them on FCR

John is an intern on hospital pediatrics as his third inpatient rotation. He has a good fund of knowledge and works well with teammates. He seems very organized and gives well thought-out presentations and plans for rounds. However, during his presentations on FCR, he often uses medical jargon which confuses families and causes undue worry. He also rarely involves families in care plans and fails to recognize when families have questions or concerns which have not been addressed. You and the senior resident have had to step in and invite family participation as well as extend rounding time to explain plans to families. You are unsure of his experience with FCR as a student, but know that other inpatient rotations use similar methods as your team.

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Feedback Script
Case 13 – Rarely involved families and does not engage them on FCR

Step 1: Action Identify the Trigger Behavior • *Describe specific examples*	• Rarely involves families in patient care planning • Uses jargon without explanation • Fails to recognize and answer family questions
Step 2: Subcompetency Identify Milestone-based correlation • *Correlate behavior to milestone/EPA anchor*	ICS2: Demonstrate the insight and understanding into emotion and human response to emotion that allows one to appropriately develop and manage human interactions—level 2 SBP1: Coordinate patient care within the healthcare system relevant to their clinical specialty—level 1 Prof6: Recognize that ambiguity is a part of clinical medicine & recognize need for and to utilize resources in dealing with uncertainty—level 2

Step 3: Evidence
Target High Yield Feedback Points
  • *Real issue behind behavior*
  • *Identify impact of behaviors*
	Use of jargon on FCR results in patients/families not understanding the plan and decreases team rounding efficiency when others must explain. Failure to answer questions means families are not engaged in patient care process. Lack of recognition of family understanding prevents the intern from learning from patients and families

Step 4: Script
Create Brief Script
  • *No more than 3-4 sentences*
  • *Neutral language*
  • *Focus on behaviors and actions*
	I appreciate that you have collected appropriate histories and have plans ready for rounds. However, I have noticed that you infrequently involve patients and families during these discussions on FCR. It is important to include patients/families in the development of treatment plans, as individual and cultural differences greatly determine adherence to and success with medical treatment. Using easy-to-understand language aids in family understanding, but also solidifies your knowledge of the topic.

Step 5: Strategy Describe Possible Plan for	• While pre-rounding, introduce FCR and invite participation & questions; write

Improvement • *Create 1-2 specific methods for improvement*	the step down in your presentation notes if needed: SOAPQ (Q=questions) • Let's all (medical team) start a challenge to see who can use the least jargon, so that we can all be more aware of how often we do so (myself included!) • In all rooms, assess for patient/family understanding using "Being a patient can be overwhelming. To be sure I've properly explained myself, can you tell me what the dx/txt/plan/etc is and what questions you might have?" Or is there a phrase you can think of using?