

Giving the Stage to Patient Voices: Strengthening Patient-Centered Clinician Education

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Patients are often reluctant to share feelings of depression, negative self-image, hopelessness, bothersome symptoms, and the true impact of the disease on their life with their clinicians, and many clinicians are reluctant or too time-pressed to ask. Live continuing education meetings can serve as a safe space in which clinician-learners can hear first-hand accounts from patients of issues that may be too charged or rushed in the intensity of a clinical visit. Using an interactive, big-group discussion, the presentation panel will share ideas, experiences, and challenges and will engage participants in real-world cases that exemplify a patient-centered approach to continuing education. The session will include suggestions from the panelists and from the audience for improving clinical outcomes through patient-centered education. To present varied perspectives, our panel will be comprised of an adult educator experienced in continuing medical education and research, a clinician, and a patient. They will provide examples and discuss best practices in integrating the patient perspective into health professionals' education from design through final evaluation. Strategies will be explored for focusing the curriculum on patient-centered care, including patient-provider shared decision making, motivational interviewing, and patient activation. Additional discussion will delve into approaches for working with patients as education planners and contributors to the curriculum as well as presenters in educational activities for clinicians. The presenters will feature examples and personal experiences of patient participation in the curriculum development team and in the live educational events (eg, an interview of the patient by the clinical expert, and a TED Talk-style presentation by the patient). The panelists will elaborate on two cases, in which they identified patients who were eager to share their story with the goal of improving continuing medical education. These patients spoke eloquently about their first-hand experiences of delays in diagnosis and misdiagnosis, adverse effects from ineffective treatment, social isolation from loved ones and at work, and unforeseen comorbidities. To prepare patients to deliver a clinically enriching presentation, educational planners trained patients to cover points relevant to the key teaching messages and learning objectives and to maintain high standards of independent and fair-balanced education. Enthusiastic clinical faculty and rehearsals were also essential for success. Continuing education providers have many ways to make educational interventions more patient-centered, and challenges can be mitigated if considered ahead of time. Representation of diverse patient populations may be a dilemma (eg, whom to involve?). Practical issues may be: How to navigate and negotiate views that are important to patients but are not reflective of the learning objectives? How to prepare patients to portray their disease journey to a wide range of clinical specialization? Education planners must also be cognizant of privacy concerns and laws. The panelists will share their perspectives on the challenges and solutions and invite comments from the audience, creating a forum for discussing meaningful patient-centered clinician education.