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Evaluating veterinary practitioner perceptions
of communication skills and training

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Abstract
A survey was conducted among veterinary practitioners in the United Kingdom (UK) and United States (US) in 2012/2013. Thematic analysis was used to identify underlying reasons behind answers to questions about the importance of communication skills and the desire to participate in postgraduate communication skills training. Lack of training among more experienced veterinary surgeons, incomplete preparation of younger practitioners, and differences in ability to communicate all contribute to gaps in communication competency. Barriers to participating in further communication training include time, cost, and doubts in the ability of training to provide value. To help enhance communication ability, communication skills should be assessed in veterinary school applicants, and communication skills training should be more thoroughly integrated into veterinary curricula. Continuing education/professional development in communication should be part of all postgraduate education, and should be targeted to learning style preferences and communication needs and challenges through an entire career in practice.

Introduction
Communication is believed to be a core skill for veterinary practitioners (Cornell and Kopcha 2007; Royal College of Veterinary Surgeons 2014; Shaw and others 2004). Effective communication contributes positively to client experience, understanding and trust (Grand and others 2013;
Mellanby and others 2011; Shaw and others 2012). It also impacts compliance with recommended treatments and enhances patient outcomes (Abood 2007; Gates and Nolan 2010; Kurtz 2006). In a recent article (Cake and others 2016), communication skills were the professional, non-technical competency best supported by evidence in the literature as contributing to practitioner success.

As a result of the increased appreciation of the importance of communication ability for veterinary surgeons, there has been increased attention to communication skills training in veterinary school curricula and in continuing professional development (CPD)/continuing education (CE) (Kogan and others 2004; Mossop and others 2015; Radford and others 2003; Shaw and Ihle 2006), and recent evidence suggests this emphasis has had a positive impact. (Kedrowicz 2016; Latham and Morris 2007; Mossop and others 2015). CPD/CE in communication is now widely available through veterinary associations (Gray 2006; Veterinary Defence Society 2016), from industry (Institute for Healthcare Communication 2016), and from independent consultants (Communication Solutions for Veterinarians 2016).

Despite this increased emphasis and the positive impact it has made (Kedrowicz 2016; Mossop and others 2015), the majority of participants in a survey of practitioners in the United Kingdom (UK) and the United States of America (US) (McDermott and others 2015) reported that, even among recent graduates, communication skills training during veterinary
school and post-graduation did not prepare them sufficiently for communicating with clients. Also, when asked whether they would be interested in receiving further communication skills training, more than half of the respondents replied that they would not be interested (McDermott and others 2015). Furthermore, other studies have reported that important elements of veterinary communication such as expressing empathy and soliciting concerns were missing from veterinary consultations (Dysart and others 2011; McArthur and Fitzgerald 2013).

In summary, this complex situation shows there is scope for improvement in communication competence training and in the performance of communication skills among veterinary practitioners. With this complexity in mind, the aim of this study was to investigate communication gaps and challenges as well as motivations for, and barriers to, participating in further communication training.

Materials and methods

Instrument

A survey on veterinary communication skills and training was conducted during 2012 and 2013. The cross-sectional study included a sample of veterinary practitioners in the United Kingdom and the United States, allowing for comparison between the two groups. The study gathered information on communication training during and after veterinary school, the degree to which training helped practitioners communicate with clients, the need for additional training, the importance of
communication skills relative to clinical knowledge and in specific
practice scenarios, and the challenges encountered by veterinary
surgeons regarding communication with clients. A combination of closed,
open and Likert-Scale type questions were used. Further details on the
survey and previous data are reported elsewhere (McDermott and others
2015).

Data analysis
Thematic analysis was used to analyze the responses to the open
questions in the survey that related to veterinary communication gaps
and needs as well as the motivation (or lack thereof) for participating in
postgraduate communication skills training. Qualitative methods are
particularly well suited to analyzing open questions in surveys, facilitating
the exploration of perceptions and experiences, and understanding a
wide range of topics (Braun and Clarke 2006; Braun and Clarke 2013).
Thematic analysis is one of the most commonly employed qualitative
methods as it is useful for exploring and identifying patterns and themes
across a dataset. It can also be used to develop descriptions of
phenomena explored in the research (Braun and Clarke 2006; Braun
and Clarke 2013).

Data were collected from the survey responses and imported into a
spreadsheet and reviewed by the authors. The data were transferred to
nVivo® 10.0 and organised for thematic analysis. To help ensure
reliability of the data (Barbour 2001) the responses were co-coded by
two authors (MM and IR) using an iterative process to generate themes
(broad patterns that capture important elements of the data) and
subthemes (specific aspects of the themes) (Braun and Clarke 2006).
Collaboration in the coding process has been cited as a means to
promote clarity, transparency and integrity of the data interpretation
(Cornish and others 2013; Hall and others 2005).

Results

Response rates and demographics

A total of 1,190/3000 responses were received from the UK (39.7%
response rate), and 584/3000 responses were received from the US
(19.5% response rate). The overall response rate was 29.6%
(1,774/6000). Mix of respondents was 57.3% female (1,013/1,768) and
42.7% male (755/1,768), with similar gender mix in the UK and US.
Range in age was 23 years to 79 years (median age 41 years), with a
higher median age in the US (47 years) than in the UK (37 years).

Themes and subthemes

The themes identified from the free text responses and reported in this
study were: 1) Room for improvement, 2) Why the lack of interest in
further training? and 3) Implications for communication training. These
and emergent subthemes are presented in Figure 1, and details are
presented below. Two additional themes were identified around the
importance of communication skills and the hallmarks of effective
communication but they were not included in this study. They concurred with a wealth of previous research but they did not add any significant new insights. Nevertheless, the fact that our respondents supported the importance and elements of effective communication adds value to the learnings from the other three themes.

(Please add Figure 1 here or as nearby as is practical)

Theme 1: Room for Improvement

As mentioned in the previous study, (McDermott and others 2015) only 35% of respondents felt the communication training they received in veterinary school prepared them “well” or “very well” for communicating with clients. Results from the current study suggest this is may be due to a combination of the amount and type of training received, experience in practice (which can be summarized by the comment “it’s difficult to know what one needs to do until one has had to do it”), and individual ability.

Training gap for senior practitioners

Many veterinary surgeons who graduated before 2000 described communication training as being primarily “on the job,” and very limited as part of the veterinary curriculum:

“Some communication [related] helpful tips were passed along by individual teachers. No formal separate class was given as I recall.” (Female practitioner, age 52, US)
“I learned [communication] by observing vets speaking to clients…” (Male practitioner, age 54, UK)

“The only real communication skills training I had at college was obtained during time I spent during vacations at RVC field station on a one-to-one basis with staff seeing referral cases.” (Male practitioner, age 71, UK)

Skills gap for junior practitioners

Several respondents felt that recent graduates, despite being more likely to have had communication training in veterinary school, were deficient in communication skills.

“We have had 12-15 vets in our practice over the last 30 years. We have hired veterinarians from most of the US universities and the biggest problem all new graduates have is communicating with the clients and building their trust.” (Male practitioner, age 69, US)

“I’m always surprised at the variation in communication skills in young graduates – from excellent to woeful.” (Male practitioner, age 68, UK)

“I am concerned that the Y Generation [is] too technological, not able to communicate face to face.” (Male practitioner, age 60, US)

Influence of individual ability
Other respondents suggested that communication is a skill that may be
developed more easily in some than others, depending on individual
ability:

“Communication skills can be learned to some degree, but it's
been my experience through the years that certain people are
naturally better with communication than others and with some,
training doesn't improve skills that much.” (Female practitioner,
age 68, US)

“[Communication is] a learned skill, one difficult to actually teach.
You must inherently ENJOY talking with people.” (Female
practitioner, age 61, US; [emphasis in the original]).)

Theme 2: Why the lack of interest in further training?

While no specific question asked why a respondent was not interested in
further postgraduate communication training, free text comments
revealed some of the possible reasons.

Time and money

Among the factors standing in the way of participation in postgraduate
communication training are time– and financial limitations and support of
employers.
“[My] boss is unlikely to see need for communication skills training and therefore unlikely to pay for it or allow time off.” (Female practitioner, age 45, UK)

“Communication training takes time, which is very limited.” (Male practitioner, age 56, UK)

Experience is a better teacher

Many suggested that communication skills training was not a substitute for the practical experience gained in practice.

“In my opinion the best way of improving communication skills is by experience.” (Female practitioner, age 25, UK)

“Training is not as effective as actually talking to clients and dealing with problems.” (Male practitioner, age 26, US)

Too late for me

Several of the more senior and experienced respondents supported the concept of training students and younger practitioners, but felt the opportunity to learn themselves may have passed.

“At my age communication skills training is probably too little too late! It is essential for new graduates. I learnt my own style from my own mistakes.” (Male practitioner, age 61, UK)

“It is certainly important for new graduates but too late for me now.” (Female practitioner, age 61, UK)
“I think you learn a lot on the job and for someone who like me [who has] been working for 25 years; we probably wouldn’t gain much from it.” (Female practitioner, age 49, UK)

Does not prepare for real world

Some comments suggested that communication training does not prepare veterinary surgeons for “real life” practice.

“There needs to be more about how to deal with different types of clients and less emphasis on situation…” (Female practitioner, age 30, UK)

“Training doesn’t prepare you for the angry/offensive client, those who you have to have difficult money conversations with, and those who will not control their children - these are the more common problems in our area.” (Male practitioner, age 28, UK)

Theme 3: Implications for communication training

Respondents shared recommendations for undergraduate and postgraduate curriculum planning and delivery.

Prioritise communication in veterinary school

Many respondents suggested that greater effort be devoted to communication training during veterinary school, beginning with the screening of applicants:
“[Introduce] preselection for communication skills when considering vet school applicants.” (Male practitioner, age 65, US)

“Communication skills should be incorporated into clinical years at university.” (Male practitioner, age 62, UK)

“I wish that we had such training when at university – I have had to learn the hard way and have felt very unprepared for many situations especially early in my career.” (Male practitioner, age 52, UK)

Make CPD/CE more accessible

In order to make training more beneficial to all practitioners (and perhaps address the contention that some can be taught better than others), some suggested it should be tailored to participants’ personalities and inherent communication ability, as well as to the most significant needs and challenges:

“It has been said that 75% of veterinarians are introverts. Learning how we process information and what our strengths are, helps more to develop communication needs than anything else.” (Male practitioner, age 68, US)

“As it doesn't come naturally to me, ongoing effort and training is necessary to maintain and improve communication skills.” (Male practitioner, age 42, UK)
Offer different formats

People learn in different ways, and there was variety in preference for training format. Some preferred lectures, both because of the familiarity of the format and the benefit of hearing from and seeing experts:

“You see what the speaker is talking about, as body language is as important as the words themselves.” (Male practitioner, age 60, US)

Online training was preferred for its convenience and flexibility:

“Very hard to fit CPD around current family/work commitments; [I] find that online training allows me to fit it around the rest of my life.” (Female practitioner, age 34, UK)

Simulated consultations were felt to be most similar to actual practice:

“It is the most effective way of identifying pitfalls in communication which occur in real-life situations and analysing how to avoid them/deal with them.” (Female practitioner, age 25, UK)

The majority of respondents indicated a preference for a combination of communication formats, as one noted:

“[You] need a combination of theory of how to deal with clients and practical to see how you perform.” (Male practitioner, age 35, UK)
Discussion

In pursuing the study aims of investigating communication training gaps and challenges, motivations for further training, and barriers to further training we were able to identify a need for improvement in communication ability among practitioners at all levels of experience. This room for improvement has been referenced by others (Bachynsky and others 2013; McArthur and Fitzgerald 2013; Severidt 2010) and this is despite the increased emphasis on communication training in veterinary medicine. In our study, likely reasons for this result include the lack of formal training in senior practitioners, the relative inexperience in practice for more junior veterinary surgeons, and individual ability in communicating.

The training gap for senior practitioners could be addressed in part by making CPD/CE more relevant to veterinary surgeons of all levels of experience.

The results of our study demonstrate how the perceived value of communication skills training, and participation in this training, could be improved by developing and promoting program content that addresses “real-world” communication challenges, such as cost discussions, dealing with distractions in the exam room, and responding to difficult clients. The skills gap for junior practitioners could be addressed through a combination of increased emphasis on communication during veterinary school and increasing the appeal of, and support for, CPD/CE
for younger practitioners. Each of these is covered in further detail in the discussion of Theme 3.

Our findings indicate that the lack of interest in further training (Theme 2) was due in part to lack of time and money. Since some practitioners would apparently welcome further communication training but feel their employers do not support it, we need to find ways to demonstrate and convince practice owners that time and money invested in building this crucial skill are well spent. One way to do this would be conducting studies to demonstrate the financial benefits of effective communication to a practice (e.g. in client retention and improved compliance).

Encouraging practices to include communication in client satisfaction surveys and promoting the benefits of effective communication to client relationships as well as to personal and job satisfaction for veterinary team members are additional ways to illuminate the value of communication training.

Bringing the training to the practice is an alternative to off-site courses that might facilitate the provision of communication skills for practice owners. After twelve months of one/day per month training sessions onsite in one practice, client-centredness of consultations improved significantly for veterinary surgeons who went through the training (Shaw and others 2010).

Another barrier to participation in training was the feeling that experience was a better teacher. Though it is likely that the best communication
training cannot prepare a practitioner for every communication experience she or he will encounter, it is also likely that learning by experience alone will not support the most complete development of communication competence (Kurtz 2006). An improved approach would be to combine experience with training during and after veterinary school which encompasses as many of the communication situations encountered in practice as possible (Hamood and others 2014); this also addresses another source of reluctance; a feeling that training does not adequately prepare one for the “real world” of client communication.

Communication in veterinary practice is closely intertwined with clinical activities such as diagnostic procedures, physical examinations, and treatments (Everitt and others 2013). Conversations also include topics that are unique to veterinary medicine with different topics (e.g. euthanasia and cost) presenting particular challenges (Hamood and others 2014; Shaw and Lagoni 2007). Communicating with a dog or cat owner is also different from communicating with a horse owner or dairy farmer (Kleen and others 2011; Moreau 2012). Educators should ensure that training considers the various topics and audiences likely to be encountered by practitioners and the variety of challenges they represent.

The third theme identified was “Implications for communication training.” The results of this study suggest that communication skills development be addressed in a comprehensive manner. This should begin with the
selection of students for veterinary school and the prioritisation of communication throughout the undergraduate curriculum. It should continue with accessible and relevant CPD/CE offerings, so that every practitioner, regardless of personality, learning preference, level of experience, or specific communication need is equipped to communicate with clients through a career in practice (see Figure 2). This could also be achieved by incorporating communication skills content into traditional CPD/CE courses, e.g., a course on heart failure, to make sure the veterinary surgeon is properly equipped to deliver important messages the owner needs to hear.

(Please place Figure 2 here or as nearby as is practical)

During the veterinary school recruitment process, interviews could include questions designed to gauge the communication ability of the applicant. Role-plays or other exploration of communication skills in the interview might be employed. This is already done in some veterinary and medical schools (Conlon and others 2012; Hecker and others 2009; Hudson and others 2009).

Once accepted into veterinary school, students should receive early reinforcement of the importance of communication skills. (Burns and others 2015; Chun and others 2009). This emphasis should be maintained throughout the undergraduate curriculum, and our study suggests some specific ways in which this could be done.
Communication training should be interwoven with the teaching of clinical skills in the veterinary curriculum. This was done recently at Texas A&M University, by combining physiologic concepts, clinical application, and communication with clients about the concepts in a physiology course assignment (Washburn and others 2016). Communication skills assessment might also be incorporated more completely with Objective Structured Clinical Examination (OSCE) stations (Bark and Shahar 2006; Davis and others 2006), including stations designed to test clinical skills. An online module about conducting a surgical procedure could include instruction on how to communicate with the client about the procedure and post-surgical follow-up (Mossop and others 2015), Implementing or expanding the use of simulated consultations (Adams and Ladner 2004; Chun and others 2009; Radford and others 2003), and peer-assisted learning (PAL) including peer- and/or instructor assessment could also improve preparation for communication situations students will encounter in practice (Epstein 2007; Strand and others 2013).

Our findings and recommendations are consistent with and build on those of other researchers who have studied learning preferences and motivations and barriers to participating in CPD/CE (Dale and others 2010; Moore and others 2000; Neel and Grindem 2010). CPD/CE may be made more accessible in part by accommodating the learning styles and preferences of practitioners (e.g. by offering training in varied
formats or by incorporating it into other more traditional courses), and by
addressing the most pertinent topics at each stage in a veterinary
surgeon’s career (Dale and others 2013; Lloyd and Walsh 2002).

Digital technologies have greatly expanded the number of ways in which
to receive information. Broadening the range of training formats available
to practitioners, including, in addition to live offsite and practice-based
training, web-accessed training modules (de Almeida and Agnoletti
2015), online professional communities (Baillie 2011), digital games and
simulators (de Bie and Lipman 2012), training apps (Frankel 2014) and
recorded programming (e.g. podcasts) (Sandars 2009) could also make
communication CPD/CE more practical, affordable, and relevant.

Limitations of the study

While this study helped further define what good communication can
offer the practice of veterinary medicine and how it may be more
completely incorporated into veterinary learning, there were some
limitations. The lower response rate from US compared to UK
practitioners makes drawing conclusions from this audience less reliable
as a representation of the practitioner community in the US. There are
also limitations in using surveys for research of this nature. Survey data
usually provide less detail than interviews, which are the most common
data collection method for qualitative research (Braun and Clarke 2006;
Braun and Clarke 2013). Unlike interviews, surveys do not permit the
research to develop rapport and to ask follow-up questions, which can
enhance the understanding of a topic and questions may be misunderstood or misinterpreted (Braun and Clarke 2006; Braun and Clarke 2013). Finally, though we used a collaborative coding method to increase rigor in interpreting the themes from the data, intercoder/interrater reliability calculation is being employed increasingly to ensure the reliability of qualitative analysis (Vaismoradi and others 2013).

In this study, most free-text comments were made by more senior practitioners. This might have skewed the overall results, particularly regarding the state of communication skills and communication challenges faced by younger practitioners. Finally, in the words of some respondents, asking about the importance of communication in communication situations could be viewed as somewhat circular. It may be that asking the questions in other ways (e.g. by asking practitioners what specific communication skills were most important when dealing with difficult topics rather than whether communication is important) could have better identified and illuminated some of the key issues and topics in the study.

Conclusions

Communication training is a valuable pursuit that should begin from the earliest days of veterinary school and continue through a lifetime in practice. While this is widely recognised, it has not been fully reflected by the emphasis on communication in undergraduate curricula or the
willingness of practitioners to participate in postgraduate communication training. Our findings indicate that further work should be done to align communication training with individual needs and abilities, and to build on the communication training framework that has been developed in recent years. Making communication an integral part of all undergraduate and postgraduate training will help ensure that more practitioners have the opportunity to improve this essential clinical skill. Future studies should address equipping veterinary practitioners for the variety of communication situations and challenges they face. Ongoing dedication to this aspect of veterinary decision making/practice however will yield significant and lasting benefits to the veterinary profession and the clients and patients it serves.

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(Figure Legends)

Figure 1: Themes and Subthemes

Figure 2: Communication Training as a Lifelong Learning Pursuit

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