Author's response to reviews

Title: Developing counseling skills through pre-recorded videos and role play: a pre- and post-intervention study in a Pakistani medical school.

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Author's response to reviews: see over
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Title: Developing counseling skills through pre-recorded videos and role play: a pre- and post-intervention study in a Pakistani medical school.

Authors’ reply to comments by reviewer Marta Van Zanten made available on October, 9 2009.

Thank you for your feedback. We have endeavored to improve our manuscript to the best of our abilities and in light of your feedback. Feel free to let us know if there are any revisions still required. Please find below a step by step response to your comments.
“Fifty four 4th year MBBS students were identified to be evaluated for communication skills by trained facilitators in a pre-intervention OSCE.”

“Majority (n= 45) displayed significant improvement in the post-intervention OSCE percentages (t-statistic: >2, p = 0.02) while nine students failed to achieve any improvement in their communication skills level.”

“Fifty-four out of 75 fourth year MBBS students (41 females and 13 males) were selected to complete the exercise in twelve batches.” and
“Twelve students were randomly selected out of each batch to be monitored.”

“It is unanimously agreed amongst members of international graduate medical education and physician licensing boards that good counseling skills of healthcare providers will not only result in high-quality care provision through accurate flow of information between healthcare individuals, teams and patients but increased physician and patient satisfaction as well [17].”
Comment: In the second paragraph of the Discussion section, “foreign medical graduates” is used once with italics and once without. Also, the more commonly accepted phrase is “international medical graduates”.

Reply: Please see the second paragraph of Discussion section. The sentences have been modified to read as follows:

“Studies have indicated that international medical graduates (IMGs) are more likely to feel pressed for time in clinical skills examination in comparison to the US graduates [21]. Furthermore, about 17% of the IMGs fail the United States Medical Licensing Exam (USMLE) Step 2 Clinical Skills (CS) component mostly due to inadequate interpersonal skills as opposed to only 4% US graduates [22].”

Comment: The last sentence of the fourth paragraph of the Discussion section should read “in the future”.

Reply: This change has been made.

“The findings from this study are invaluable still, and can serve as the basis of conducting a more elaborate one in the future.”

Comment: In the first sentence of the fifth paragraph of the Discussion section, it is not clear what is meant by “outdoor facilities”.

Reply: By outdoor facilities we meant outpatient departments (OPD). The first sentence of the fifth paragraph of the Discussion section has been modified to clarify this.

“The unsatisfactory performance of students in real patient encounters is probably due to multiple factors that were not explored in this study, the leading ones being: a careless attitude when in a non-testing environment, language barrier (different local dialects), difficulty in adapting to hospital and outpatient departments, unease when dealing with non-familiar people etc.”

Comment: In the Acknowledgements section, the name Dr. William Burdick is misspelled.

Reply: The spellings have been corrected.

“This study would not have been possible without the support and guidance of Dr. William Burdick and Dr. Page Morahan from the FAIMER Institute (Foundation for Advancement of International Medical Education and Research), Philadelphia, USA.”

Comment: References with typos include numbers 6, 7, 8, 10, 11, and 24.

Reply: Please see the References section for the corrections made.


**Comment:** Based on your assessment of the validity of the manuscript, what do you advise should be the next step?

**Reply:** Some suggestions regarding curricular revision, medical education upgrading, improvising methodologies etc have already been mentioned in the manuscript. Additional comments have been added to the Discussion section; please see the last paragraph of that section.

“Based on this study, we suggest that medical schools of the developing world particularly Pakistan, should take initiatives to not only revise their curricula but train the facilitators to improvise teaching methodologies as well. This can be achieved with some effort on the part of the medical education departments and administration and does not necessarily imply the investment of multiple resources. Introduction of formal courses in communication skills and subsequent assessment can serve to build the competence level of the medical students [24]. Significant evidence is available of the utility of such initiatives and their potential contribution to producing more effective health care providers [25].”
Authors’ response to review

Title: Developing counseling skills through pre-recorded videos and role play: a pre- and post-intervention study in a Pakistani medical school.

Authors’ reply to comments by reviewer Lynn Y. Kosowicz made available on September, 24 2009.

We are very grateful to you for reviewing our manuscript and helping us in making it acceptable for publication. Please find below a step by step response to your comments.
**Major Compulsory Revisions:**

**Comment:** The first and third have been adequately addressed. I remain concerned that the "intervention" is more than just the training with videos and role-play, but also the 2 week community rotation (and other intervening experiences before the 6 month retest). I agree with the authors that a delayed test of effectiveness has merit, but their conclusions should reflect the fact that they are unable to tell which intervention(s) account for the results (and they do appropriately address this in the limitations). The authors state in their methods section "Our intervention included a two-week rotation with the community medicine department" yet, the conclusion reads "Videos and role play are effective modes of teaching counseling skills to medical students" Perhaps rewording the conclusions to indicate that the videos and role play in addition to clinical experience were effective would be a more accurate reflection of the intervention.

**Reply:** As suggest by the reviewer, the conclusions have been modified to reflect the effect of both, the community medicine rotation as well as videos and role play on building the communication skills of medical students.

**Abstract:**

"Videos and role play in combination with community and clinical exposure are effective modes of teaching counseling skills to medical students. They can be successfully utilized even in a limited resource setup, as demonstrated by our trial."

**Conclusion:**

"Pre-recorded videos and role play are simple, cost effective tools for demonstrating counseling skills to medical students in addition to clinical and community exposure. The exact magnitude of the impact of intervention on the communication skills of students cannot be predicted in view of the limitations. However, it still offers significant evidence towards successful implementation of a formal communication skills development initiative, under resource limited circumstances."

**Minor grammatical suggestions:**

**Comment:** In the Discussion: currently reads: "It is unanimously agreed amongst members of international graduate medical education and physician licensing boards that good counseling skills of health care providers will result in high-quality care provision through accurate flow of information between healthcare individuals, teams and patients but increased physician and patient satisfaction [17]." (the “but” doesn’t flow- should it read "will result not only in..." and then, "but also increased..."")

**Reply:** This sentence in the Discussion has been modified to read as follow:

"It is unanimously agreed amongst members of international graduate medical education and physician licensing boards that good counseling skills of health care providers will not only result in high-quality care provision through accurate flow of information between healthcare individuals, teams and patients but increased physician and patient satisfaction as well [17]."
Comment: Currently reads "A variety of teaching and evaluation tools are being developed to effectively incorporate CIS into physicians and perform a standardized assessment" (awkward—maybe change to ..."effectively incorporate CIS into physician training and standardized performance assessments")
Reply: The suggested change has been made.

“A variety of teaching and evaluation tools, are being developed to effectively incorporate CIS into physicians training and standardized assessments [18].”

Comment: Currently reads: "Prerecorded videotapes and objective assessment through role playing by trained facilitators are simple and cost effective alternative."(Should be alternatives)
Reply: This sentence has been modified as suggested.

“Prerecorded videotapes and objective assessment through role playing by trained facilitators are simple and cost effective alternatives.”