Communicating the Oncotype DX® test results: a novel educational workshop for specialist breast care nurses

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Communicating the Oncotype DX® test results: a novel educational workshop for specialist breast care nurses

Letter to the editor

We report results from three intensive 6-hour communication workshops held for 69 UK specialist breast care nurses (SBCNs). The one-day workshops aimed to help participants explain Oncotype DX Breast Recurrence Score® results (RSs) to patients and contained three primary elements from the evidence-based TARGET (Talking About Risk in the Context of Genomic Tests) programme shown to enhance knowledge acquisition, skills development and self-awareness [Fallowfield et al 2019]. Important features were to increase participants’ self-awareness of their own numeracy skills and attitudes to uncertainty. As the health literacy and numeracy of lay populations worldwide are generally poor [Rowlands et al. 2015], nurses need to be adept at explaining ratios, converting probabilities into percentages, and vice versa as well as using simple analogies to promote understanding. Many patients with breast cancer are anxious and uncertain and may overly attend to risk information missing nuanced or ambiguously phrased recommendations about the harms and benefits of chemotherapy so all healthcare professionals require an appreciation of how their own tolerance to uncertainty and risk can ‘leak’ out during conversations.

Our workshops comprised two didactic presentations, one about the genomic test itself and research on the derivation and interpretation of scores, the other about the psychology of risk and uncertainty with interactive exercises (Intolerance of Uncertainty [Carlton, 2012] and 4 item basic numeracy test [Schwartz 1997]). Participants then split into smaller groups for two novel practical sessions led by experienced facilitators. Nurses first viewed an interaction between an oncologist and patient simulator followed by a facilitator-led discussion about likely areas of confusion. The patients just seen in the videos entered the
room with questions they now needed the nurses to answer. SBCNs took turns in responding to the patient simulator’s areas of confusion and used the group’s collective knowledge where necessary to address challenging questions. This method of role-play allowed junior SBCNs to participate actively and safely during the workshop. Additional feedback from the simulated patients helped the group to consider newer terminology such as appropriate analogies to aid explanations about risk of recurrence.

Participants rated their confidence pre and post workshop when discussing low, intermediate and high Oncotype DX Breast Recurrence Score® results with patients who held different attitudes to risk. Attendees rated the quality of the workshop and likelihood of recommending it to colleagues.

Results showed that most SBCNs had intolerance to uncertainty scores within the normal range, although 11 scored >35. Basic numeracy was quite poor especially for questions 2 and 3 (Table 1).

<table>
<thead>
<tr>
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<th>Results from the basic numeracy exercise (n=68)</th>
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<tbody>
<tr>
<td>N=68 (%)</td>
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<tr>
<td>1</td>
<td>A person taking Drug A has a 1% chance of an allergic reaction. If 1000 people take the drug, how many will have a reaction? (10)</td>
</tr>
<tr>
<td>2</td>
<td>A person taking Drug B has a 1 in a 1000 chance of an allergic reaction. What % of people taking the drug will have a reaction? (0.1%)</td>
</tr>
<tr>
<td>3</td>
<td>The chances of getting a serious viral infection is 0.0005. How many of 10,000 exposed people might get the infection? (5)</td>
</tr>
<tr>
<td>4</td>
<td>Imagine I flip a fair coin 1000 times. How many times will the coin land heads up? (500)</td>
</tr>
</tbody>
</table>

Nurses’ post-workshop self-confidence (a key element required for transfer of communication skills into a clinic setting), increased significantly for all questions and general feedback was extremely positive. Most found the focused workshops useful (9.6/10), informative (9.6/10) and enjoyable (9.6/10) and 68/69 said they would “definitely recommend” the course to their colleagues.

“I am not a confident role player but found the process very valuable and the actors were brilliant as were many of the BCNs. It really got everybody thinking.”

“This sort of practical session with actresses should form a regular part of refresher training for BCNs. Would like my whole team to be exposed to such a fantastic day”
In this era of targeted breast cancer treatments, discussions about the logic and rationale behind treatment recommendations have become increasingly complex. Our study showed that SBCNs benefitted from a novel, short focused communication skills workshop on how to explain risk of recurrence in the context of genomic test results. They appreciated how their own intolerance to uncertainty could affect the way they discuss risk openly with patients or engage in shared decision-making.

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References


