

# Better clinical communication in hospital - a study of the effect of a Norwegian version of the "Four habits Approach to Effective Clinical Communication" in Akershus University Hospital

<b>Submission date</b> 23/04/2007	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 12/06/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 21/12/2011	<b>Condition category</b> Other	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

## **Secondary identifying numbers**

Helse Øst RHF (Regional Authorities for Hospital Care, Eastern Norway) 2007 - 015

# **Study information**

## **Scientific Title**

## **Acronym**

4HN

## **Study objectives**

The Four Habits Model describes the four patterns of behaviour used by clinicians during medical interviews (Frankel and Stein, 2001). Hypothesis: A 20-hour intensive course in effective clinical communication according to the "Four Habits" approach will significantly alter the communication skills of participating physicians.

Frankel and Stein, Getting the most out of the clinical encounter: the four habits model, J Med Pract Manage, 2001 Jan-Feb;16(4):184-91

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

The Regional Ethics Committee for Medical Research of East Norway gave approval on the 13th April 2007 (ref: 1.2007.356)

## **Study design**

Randomised controlled trial.

## **Primary study design**

Interventional

## **Secondary study design**

Randomised controlled trial

## **Study setting(s)**

Hospital

## **Study type(s)**

Diagnostic

## **Participant information sheet**

## **Health condition(s) or problem(s) studied**

Clinical communication

## **Interventions**

Participating physicians are given a 20-hour intensive course in clinical communication using the "Four habits" approach. 40 physicians will attend the training course in June 2007, and the other

40 physicians will attend the course in January 2008. For all physicians, two consultations /meetings will be recorded before the June course, four consultations/meetings will be recorded between the June and the January courses, and two consultations/meetings will be recorded after the January course for evaluation.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome measure**

The videotaped consultations/meetings were assessed using the Four Habits Coding Scheme (Krupat et al, 2006).

Krupat E, Frankel R, Stein T, Irish J. The Four Habits Coding Scheme: validation of an instrument to assess clinicians communication behavior. Pat Educ Couns 2006; 62: 38-45.

**Secondary outcome measures**

1. Change in Habit 1 through 4 behaviours according to which habit the physicians particularly commit themselves to improve (physicians may want to implement all habits, but are prompted to give priority to one of them)
2. Changes in Habits in 20% of physicians with the lowest scores
3. Changes in Habits across age groups, gender, specialties, seniors/juniors
4. Change in physician communication specific self-efficacy
5. Change in patient satisfaction

**Overall study start date**

13/04/2007

**Completion date**

31/03/2010

## Eligibility

**Key inclusion criteria**

Physicians under 60 years doing full or part-time clinical work in somatic departments of Akershus University Hospital. Altogether 8 real consultations or meetings with patients/relatives of patients per physician are recruited consecutively.

**Participant type(s)**

Patient

**Age group**

Adult

**Sex**

Both

**Target number of participants**

64 physicians (512 consultations)

**Key exclusion criteria**

None for physicians.

For consultations:

1. Anticipated consultation duration less than 5 minutes
2. Consultations or meetings with patients or relatives where they are in a particularly vulnerable situation and where videotaping would be inappropriate (e.g. when conveying serious messages)

**Date of first enrolment**

13/04/2007

**Date of final enrolment**

31/03/2010

## Locations

**Countries of recruitment**

Norway

**Study participating centre**

Helse Øst Health Services Research Centre

Lørenskog

Norway

1478

## Sponsor information

**Organisation**

Regional Authorities for Hospital Care, Eastern Norway (Helse Øst RHF)

**Sponsor details**

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**Sponsor type**

Government

**Website**

<http://www.helse-ost.no>

**ROR**

<https://ror.org/02qx2s478>

## Funder(s)

**Funder type**

Government

**Funder Name**

Regional Authorities for Hospital Care, Eastern Norway (Helse Øst RHF) (ref: 2007 - 015)

## Results and Publications

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date**

**Individual participant data (IPD) sharing plan**

**IPD sharing plan summary**

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results of substudy on self-efficacy among doctors in hospitals after a course in clinical communication	19/11/2009		Yes	No
<a href="#">Results article</a>	results on confirmation of informed consent by SMS	01/02/2010		Yes	No
<a href="#">Results article</a>	results	01/08/2011		Yes	No