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Developing an evidence-based decision-support tool for culturally sensitive communication in hepatitis D care

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Introduction

- Liver care nurses support patients with HBV/HDV co-infection in developing essential self-management skills but communication and care is frequently challenged by patients' and nurses cultural and linguistic diversity.

Aim

- To develop an evidence-based decision-support tool to guide culturally sensitive communication strategies along the hepatitis D care pathway.

Methods

Systmatic literature review
- Identification of potential communication aids: professional/ad hoc/informal interpreter, AI-driven tools, visual aids[1]
- Identification of approaches to assess communication risk/complexity[2]

Workshop Swiss nurses
- Identification of situations along the HDV care pathway
- Preliminary allocation of suitable communication tools

Workshop international nurses
- Validation and refinement
- Development of exemplar case vignettes

Review with patient & expert
- Reflection of professional and patient perspectives
- Finalisation of evidence-based decision-support tool

Final result

Evidence-based decision-support tool for all patients with language and/or cultural barriers

Step 1: Follow the HDV care pathway and identify the situation

Step 2: Apply triage question: "What is the potential impact if this communication is misunderstood?"

Step 3: Choose support according to assigned impact level

🟢 **Low** – AI-tools / family possible 🟡 **Moderate** – Professional recommended 🔴 **High** – Professional mandatory

➢ How to apply the tool in practice

Step 1 HDV care pathway	Step 2 Potential impact of misunderstanding	Step 3 Recommendation
Referral / Initial visit	🔴	Professional interpreter recommended
Diagnosis communication	🟡–🔴	Professional interpreter recommended (informal only if risk is low)
Care planning - Tx. readiness	🔴	Professional interpreter recommended
Therapy initiation	🟡–🔴	Professional interpreter recommended (informal only in selected cases)
Planned Follow-up	🟢–🟡	AI-tools and/or informal interpreter possible
Unplanned Follow-up	🟢–🟡–🔴	Adapt to situation (professional preferred in high-risk cases)

➢ Case vignettes were developed for all care steps to represent a range of scenarios (🟢–🟡–🔴); two examples are shown here.

Example 1:
A patient is evaluated for complex treatment, requiring understanding of procedures, risks, and long-term adherence.
Step 1: Care planning & treatment readiness
Step 2: Impact of misunderstanding = 🔴 (high)
Step 3: → Professional interpreter mandatory

Example 2:
A patient with HDV attends a routine follow-up visit and demonstrates good understanding of the treatment plan.
Step 1: Planned follow-up → stable situation
Step 2: Impact of misunderstanding = 🟢 (low)
Step 3: → AI tools or informal interpreter

ASSESS SITUATION
Where are we in the pathway?

DEFINE IMPACT
What happens if misunderstood?

SELECT SUPPORT
What is appropriate and feasible?

Conclusions

- Structured, evidence-based communication is essential in HDV care, and communication needs vary along the care pathway.
- Professional interpreters are critical in high-impact situations.
- The acutal tool provides a practical, adaptable decision-support approach for clinical use.

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