Foundations for Communication: Module 1 - Verbal Communication

University of Saskatchewan
Postgraduate Medical Education
CanMEDS eLearning Module

Author: PGME Office Team
Dr. Betty Anne Rohr, Dr. Ayisha Kurji, Dr. Ope Okunola, Dr. Loni Desanghere, Dr. Anurag Saxena
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Acknowledgement

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CanMEDS/CanMEDS-FM Framework

Image adapted from the CanMEDS Physician Competency Diagram with permission from the Royal College of Physicians and Surgeons of Canada. ©2009 The College of Family Physicians of Canada.
Module Instructions

- Welcome to the Foundations e-learning module for University of Saskatchewan PGY-1 Residents. This module includes a series of readings and three activities. The core activities and readings in the module should take approximately 1.5 hours to complete.

Read through the slides.

Complete the activities along the way as indicated.

Take some time to reflect on how you can continue to improve, and share these reflections with your Program Director, co-residents, academic advisor, or mentor.
A basic foundation of the CanMEDS/CanMEDS-FM Communicator Role is critical to the development of lifelong learning skills within the role. Communicator role is focused on the patient-physician relationship and related communication skills essential to patient health care.

The purpose of this module is to provide a self-paced independent framework to enhance your own foundational knowledge and skills of communication through **reflective practice**.

This module will guide you through some of the foundational activities to reflect on your current understanding and practice and provide a framework in which you can develop your personal Communicator profile.

The module also includes supplemental resources for further independent learning.
Objectives

• List the CanMEDS/CanMEDS-FM competencies related to communication.
• Discuss why the communicator role matters.
• Describe the qualities of a good communicator.
• Discuss one framework for verbal communication skills.
• Develop some possible communication scripts for various communication scenarios in your field.
Remember: Communication Skills...

are skills that can be readily defined, taught, and assessed.

need to be intentionally developed and refined as all essential clinical skills need to be practiced deliberately.
Physicians are able to:

1. Establish professional therapeutic relationships with patients and their families.
2. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families.
3. Share health care information and plans with patients and their families.
4. Engage patients and their families in developing plans that reflect the patient’s health care needs and goals.
5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy.
The details: What is the CanMEDS Communicator Role?

As Communicators, physicians form relationships with patients and their families that facilitate the gathering and sharing of essential information for effective health care.

As Communicators, family physicians foster therapeutic relationships with patients and their families. This incorporates the dynamic exchanges that occur before, during, and after the medical encounter that facilitate gathering and sharing essential information for effective patient-centered health care.

Consider the Communicator Role and why is it important in the framework and its contribution to physician competency.

• Write a statement as to why you think the Communicator Role important.

• After writing your statement, move to the next slide and listen to the brief overview from Dr. Sue Dojiji of the University of Ottawa.
Activity 1 contd.: Self-Reflection on why does the Communicator Role matter

Click on the following link to watch the Dr. Sue Dojeiji ~ “Developing the CanMEDS Communicator” (1:47 minutes)
https://www.youtube.com/watch?v=164u4e7_ahs&feature=youtu.be
Effective communication promotes:

1. increased accuracy of information
2. improved outcomes of care (physiological and psychological)
3. heightened perceptions by patients that they are being supported by their physicians
4. reduced rates of adverse events and medical errors
5. better protection against complaints and malpractice claims

Why the Communicator Role matters

Consider that a medical interview is central to a physician’s practice and that a physician conducts about 200,000 interviews in their professional lifetime. Effective communication is integral to a positive safety culture that supports an informed culture, a reporting culture, a just culture, and a learning culture.

References and Additional Reading:

Causes of Patient Safety Events

- One of the most common root cause of patient safety events is related to communication.
- Even when we think we are being clear, we can do better.

Most Frequently Identified Root Causes of Sentinel Events Identified by The Joint Commission in 2011

- Human Factors
- Leadership
- Communication
- Assessment
- Physical Environment
- Information Management
- Operative Care
- Care Planning
- Continuum of Care
- Medication Use

(Accessed April 17, 2012)
Activity 2: Self-Reflection - What are features of a good communicator?

Consider the features of a good communicator. Can you think of any good role models that you observed recently?

- Write down 3 to 5 key characteristics that describe good communication.
- After writing your key points, move to the next slide watch the Dr. Riess of Harvard Medical School unwrap the skill of EMPATHY in communication. Note examples that contribute to good communication.
Activity 2: Self-Reflection - What are features of a good communicator?

Do you recognize any examples related to the following list of a good communicator:

- Interactive vs Direct Transmission
- Dynamic and responsive
- Reduces uncertainty
- Planned, purposeful
- Welcomes practice and feedback

Additional Reading:
Communications Skills from CFPC:
Verbal Communication Skills Framework
Activity

Watch the YouTube video with a focus on patient-centeredness. The first 8 min and 40 sec discuss how and why this is so important, with an example taking until about 10 min. More details of how to break down the sections take until 30 min if you would like more detail, and then at 30 min, there is another example.

References


Click on the following link to watch a CIR Policy and Education Initiative on physician-patient communication (36:00 minutes): https://www.youtube.com/watch?v=36Cuuzw1p8w
HINTS on patient centeredness

1. Orient yourself to the patient: face them and sit down if possible.

2. Watch for signals and cues. Seek confirmation. Silence may not be agreement.
   1. Non-verbal cues can provide a lot of information about what is going on.
      1. Eg: Is the patient engaged, making eye contact, and nodding? Or are they looking away with their arms crossed, and becoming less talkative?

3. Be careful about labels to patients or their concerns.
   1. Eg: ensure you are using their preferred pronouns, using the language they use to refer to their concerns
The Calgary-Cambridge Observation Guide is a framework that is helpful to understanding the multiple communication tasks involved in a medical interview as well as the integration of content and process throughout the framework.

The table to the right is simplified to help offer a guide to what in practice may involve a more complex integration of content and processes.

Reference

Activity 4: Day to Day communication

- Good communication takes practice, thoughtfulness, planning, and reflection

- Review the examples in worksheet T3 for examples of how to apply the Calgary-Cambridge framework
Communication Strategies and Terms

The following list consists of key words of the communicator role:

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<tbody>
<tr>
<td>• Categorizing</td>
<td>• Patient-centered approach</td>
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<td>• Chunking</td>
<td>• Plain language</td>
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<td>• Common Ground</td>
<td>• Safety net</td>
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<td>• Difficult discussion</td>
<td>• Shared-decision making</td>
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<td>• Encounter</td>
<td>• Signposting</td>
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<td>• Non-verbal communication</td>
<td>• Therapeutic Relationships</td>
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<td>• Paraverbal communication</td>
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Suggested activities (optional):
• Review the definitions of these terms in worksheet A3
• If there are any that you want to learn more about, spend some time researching
Seek Opportunities

As you work in your discipline, you will encounter day-to-day opportunities to exercise communication scenarios and activities from which you will develop your Communicator competencies and profile. You may share your reflections with your Program Director, co-residents, academic advisor, mentor, or rotation supervisor.
Some More Resources...

Improving communication between physicians

Patient-physician Communication