

Appendix K: Drexel University Communication Curriculum

Communication Curriculum

Introduction Welcome to the DocCom Learning Curriculum. We believe that using this curriculum will enable your faculty to create an outstanding educational experience in some essential aspects of clinician-patient communication. When learners master the curriculum material, they will deliver higher quality patient care and more empathic care. For example, they will be more skilled in working with challenging clinical situations such as giving bad news or relating to an angry family member. This curriculum specifically assists learners striving to fulfill the ACGME competency requirements in clinician-patient communication.

BASIC MODULES

Communication Basic Modules (Modules 1 - 12)

01. Overview

Geoff Gordon MD, Oregon Health & Science University, Portland

02. Mindfulness and Reflection in Clinical Training and Practice

Ronald Epstein MD, Rochester University

Learning Objectives:

- Describe common physician characteristics that may contribute to unhealthy personal beliefs, behaviors, and habits.
- Describe common causes and manifestations of professional burnout.
- Describe healthy cognitive, emotional, and behavioral practices that can promote your well-being and sustain you throughout a career in medicine.
- Describe 3 changes in attitude, behavior or practice you could make that would improve or sustain your well-being.
- Disclose these changes and discuss their importance and potential barriers to their implementation with 2 important people in your life.
- Discuss why physician well-being results in improved relationships and outcomes.

03. Therapeutic Aspects of Medical Encounters

David Brody MD, Denver Health; Dennis Novack MD, Drexel University College of Medicine, Philadelphia

Learning Objectives:

- Describe core concepts underlying the therapeutic efficacy of the physician patient relationship
- List the therapeutic goals of medical encounters
- Describe strategies that advance the therapeutic aims of your medical encounters

04. Balance, Self-Care

John F. Christensen, PhD., Legacy Health System, Portland, Oregon

Learning Objectives:

- Describe common physician characteristics that may contribute to unhealthy personal beliefs, behaviors, and habits.
- Describe common causes and manifestations of professional burnout.
- Describe healthy cognitive, emotional, and behavioral practices that can promote your well-being and sustain you throughout a career in medicine.
- Describe 3 changes in attitude, behavior or practice you could make that would improve or sustain your well-being.
- Disclose these changes and discuss their importance and potential barriers to their implementation with 2 important people in your life.
- Discuss why physician well-being results in improved relationships and outcomes.

05. Integrated Patient-centered and Clinician-centered Interviewing - Structure and Content of the Interview

Auguste H. Fortin VI, MD, MPH, Yale University; Francesca Dwamena MD, and Robert C. Smith MD, ScM, Michigan State University

Learning Objectives:

- Describe the content, and process of a “complete” medical history,
- Describe the difference between the tasks or functions of an interview and its structure,
- Describe patient-centered and doctor-centered interview goals and skills,
- Describe the different contributions of patient-centered and doctor-centered skills to understanding the patient’s full (biopsychosocial) history,
- Describe the content and structure the written medical history.

06. Build a Relationship

Julian Bird MD, Kings College, London; Steve Cole MD, SUNY, Stony Brook

Learning Objectives:

- State at least five reasons why relationship building is key to medical care
- State three key principles of relationship building
- Demonstrate five basic relationship building skills

07. Open the Discussion

Beth Lown MD, Harvard University; Ron Saizow MD, University of Oklahoma

Learning Objectives:

- Discuss the importance and rationale for eliciting all patient concerns to establish, through negotiation when necessary, the visit agenda.
- Discuss and implement communication strategies at the beginning of each medical encounter to elicit a comprehensive list of patients’ concerns.
- Discuss and implement communication strategies to prioritize and reach agreement on the agenda.
- Identify personal barriers to the elicitation of concerns, and the risks of failure to do so.

08. Gather Information

Beth Lown MD, Harvard University

Learning Objectives:

- Describe[JZI] the primary goals of relationship-centered information gathering.
- Describe and demonstrate relationship-centered strategies for gathering information.
- Describe and demonstrate strategies for encouraging patient participation in gathering information.
- Use your knowledge and skills to gather information effectively from a patient.

09. Understand the Patient’s Perspective

Beth Lown MD, Harvard University

Learning Objectives:

- Endeavor to more consistently appreciate your patients’ perspectives and to “see the world through their eyes.”
- Understand how patients’ social contexts affect their health and illness behaviors.
- Describe and demonstrate skills to elicit patients’ social context, explanatory models, concerns and expectations.
- Explore personal assumptions and potential barriers to understanding patients’ contexts and perspectives.

10. Share Information

Beth Lown MD, Harvard University

Learning Objectives:

- Understand the challenges that you will face when sharing information with patients
- Describe and demonstrate a systematic, relationship-centered approach to sharing information
- What skills do you need to practice to improve your relationship-centered sharing of information, and when will you do this?

11. Reach Agreement

Beth Lown MD, Harvard University

Learning Objectives:

- Describe conceptual models of decision making and reaching agreement.
- Describe evidence regarding patient participation in their decisions and care.
- Describe their own attitudes, preferences and approaches to partnering with patients in decision making.
- Describe and demonstrate skills for reaching agreement about decisions and plans.

12. Provide Closure

Beth Lown MD, Harvard University

Learning Objectives:

- Describe clinician behaviors that facilitate effective visit closure.
- Describe physician and patient behaviors that interrupt or prolong closure.
- Describe your approach to saying goodbye to patients in various clinical settings.
- Describe and demonstrate specific communication skills for providing closure.

ADVANCED ELEMENTS

13. Responding to Strong Emotions

Barry Egener MD, Legacy Health System, Portland, Oregon
With Doctoring Curriculum Facilitator Guide

14. It Goes without Saying: Nonverbal Communication in Clinician-Patient Relationships

Jeannette M. Shorey II MD, University of Arkansas Medical School

15. Understanding Difference and Diversity in the Medical Encounter: Communication across Cultures

Calvin Chou MD, PhD; University of California, San Francisco; Ellen Pearlman MD, New York University; Cathy Risdon MD, McMaster University

16. Promoting Adherence and Health Behavior Change

Carol Chou MD, University of Pennsylvania; Michael Goldstein MD, Brown University; F. Dan Duffy MD, U Oklahoma, Tulsa; Rob Shochet MD, Johns Hopkins University
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17. Shared Decision-Making

Clarence H. Braddock III MD, MPH, Stanford University

18. Exploring Sexual Issues

Rich Frankel PhD, Indiana University; Elizabeth Edwardsen MD, Rochester University; Sarah Williams MD, New York University

19. Exploring Spirituality & Religious Beliefs

Shimon Waldfogel MD, Thomas Jefferson University, and Stuart R. Sprague, PhD, AnMed Health

COMMUNICATING IN SPECIFIC SITUATIONS

20. Family Interview

Kathy Cole-Kelly MD, Case Western, Tom Campbell MD, Rochester University

21. Communication and Relationships with Children and Parents

Elizabeth Rider MSW, MD, Harvard University

22. The Adolescent Interview

Ken Ginsberg MD, Oana Tomescu MD, University of Pennsylvania

23. The Geriatric Interview

Brent C. Williams MD, MPH and James T. Pacala MD, MS

24. Tobacco Intervention

by Michael Goldstein, MD, and Margaret Dundon, PhD, VHA National Center for Health Promotion and Disease Prevention as well as Susan Swartz Woods, MD, Oregon Health & Sciences University

25. Motivating Healthy Diet and Physical Activity

Geoffrey Williams MD, Rochester University

26. Anxiety and Panic Disorder

Steven Locke MD, Harvard University

27. Communicating with Depressed Patients

Steven Cole MD, SUNY, Stony Brook
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28. Domestic Violence

Nielufar Varjavand MD and Dennis Novack MD, Drexel University College of Medicine
With Doctoring Curriculum Facilitator Guide

29. Alcohol: Interviewing and Advising

William Clark MD, Harvard Medical School; and Sharon Parish MD, Albert Einstein College of Medicine
With Doctoring Curriculum Facilitator Guide

30. The Clinical Assessment of Substance Use Disorders

Barbara A. Schindler MD, Drexel University College of Medicine, and Ted Parran MD, Case Western Reserve
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31. Medically Unexplained Symptoms and Somatization

Francesca Dwamena MD, Michigan State University; Felice Milan MD, Albert Einstein College of Medicine; Auguste H. Fortin VI MD, MPH, Yale University, Robert C. Smith MD, ScM, Michigan State University

32. Advance Directives

Julie Childers, M.D. and Eva B. Reitschuler-Cross, M.D., University of Pittsburgh School of Medicine; Lynn O'Neill, M.D., Emory University School of Medicine

33. Giving Bad News

Timothy Quill MD, Catherine Gracey MD, Carly Dennis MD, University of Rochester; Anthony Caprio MD, Carolinas Healthcare System
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34. Communication near the End of Life

Muriel Gillick MD, Harvard University
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35. Dialog about Unwanted Outcomes

Peter Barnett MD, University of New Mexico

36. Ending Clinician-Patient Relationships

Peter Lichstein MD, Wake Forrest University

COMMUNICATING WITH COLLEAGUES

37. The Oral Presentation

Alicia Monroe MD, Brown University

38. High Performance Teams: Diversity and RESPECT

Cathy Risdon MD, McMaster University, Marla Rowe MD, Wayne State University, Zeev Neuwirth MD PhD, Harvard University, Anthony Suchman MD, Rochester University, Julie Crosson MD and Carol Mostow MD, Boston University School of Medicine

Description:

Understand how effective multidisciplinary teams are used for effective patient care.

Learning Objectives:

- List five stages of team development.
- List the skills of the RESPECT mnemonic
- Elicit perspectives across all levels of hierarchy, professional roles and diversity of background.
- Respond with empathy when team members express feelings and concerns.
- Affirm the value of difference and diversity to team effectiveness. Identify skills that help teams collaborate when challenged by change or conflict and when debriefing adverse events

39. Talking with Impaired Clinicians

Peter Barnett MD, University of New Mexico

40. Giving Effective Feedback: Enhancing the Ratio of Signal to Noise

Burton Landau PhD, Drexel University College of Medicine

With Doctoring Curriculum Facilitator Guide

41. Professionalism: Boundary Issues

Elizabeth Gaufberg MD, MPH, Harvard Medical School

With Doctoring Curriculum Facilitator Guide

42. Effective Clinical Teaching

Dennis Novack MD, Allison Ferris MD, Burton Landau PhD, Drexel University College of Medicine, and Ronald Saizow MD, University of Oklahoma

With Guidelines for Residents