

## INTENSIVE COMMUNICATION SKILLS PROGRAM - APPLICATION

**Date of Program:** March 15-17, 2019

**Location of Program:** Brown University, Providence, RI

### APPLICANT CONTACT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Nickname/name preferred on name badge: \_\_\_\_\_

Degree(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Extension: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Where did you hear about this course? (Please check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> IHC website                           | <input type="checkbox"/> Internet search          | <input type="checkbox"/> Colleague/word of mouth          |
| <input type="checkbox"/> I attended an IHC workshop            | <input type="checkbox"/> IHC post-workshop survey | <input type="checkbox"/> Trained as an IHC faculty member |
| <input type="checkbox"/> I attended an IHC webinar             | <input type="checkbox"/> Media/news               | <input type="checkbox"/> Referred by my organization      |
| <input type="checkbox"/> Other ( <i>please specify</i> ) _____ |   |   |

### YOUR FULL APPLICATION WILL INCLUDE THE FOLLOWING:

- Contact Information page
- Letter describing your reasons for wanting to attend the program
- Copy of your CV
- Your plans for working with a coach in your area

**Please return this completed package by February 1, 2019 to IHC**

ATTN: Laurie Mansfield E-mail: [lmansfield@healthcarecomm.org](mailto:lmansfield@healthcarecomm.org), Institute for Healthcare Communication  
171 Orange Street, 2R | New Haven, CT 06510-3153 | Tel: (800) 800-6907 Fax: (203) 772-1066

**PAYMENT:** IHC accepts payments by check or credit card for the full payment once you have been notified by email that your application has been accepted. If you cancel 30 days or more before the beginning of the program, you will be fully refunded. There is an 80% refund after the 30 day cut-off.

**TUITION:**

- a.  **GROUP** (1:5) Program at Brown University is \$2,800.00 USD (Note if less than 5 attendees have registered one month prior to the program dates, the program may be cancelled.)
- b.  **INDIVIDUAL** (1:1) program may be scheduled at any time. The tuition is \$5,000 USD if held at Brown University, and \$7,000.00 USD If held local to learner.

\* Tuition cost does NOT include travel, accommodations & follow-up coaching expenses.

<input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Pay by Credit Card		
	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	<input type="checkbox"/> Discover
	Name on Card: _____		
	Card Number: _____	Expiry:      Mon      Yr	Security Code: _____
	E-mail: _____		

## **INTENSIVE COMMUNICATION SKILLS COURSE**

### **FOLLOW-UP COACHING AND FEEDBACK:**

At the conclusion of the 2.0-day Intensive course, it is strongly recommended that you establish a one-year plan to continue to develop your communication skills. The task for you is to continue to work with a clinician coach upon returning home. The clinician coach is a person who understands the clinical environment, identifies and can model the skills to be learned, can be a support and resource to you, and who understands and values the coaching process.

You may already know of someone in your local area, or we can advise you on how to find someone nearby who can help you. We cannot underestimate the value of continuing your professional development after the Intensive experience. You will need to devote time and effort once you return to your home environment so that the skills and techniques that you learn and practice at the course can be translated into your clinical practice routine.

If you cannot come up with a local resource for coaching, IHC has a selection of clinician coaches who have completed IHC's Coaching Clinicians for Enhanced Performance course.

**Below is a list of suggested IHC coaches; coaches can work with you on-site in your own professional practice/location or work with you through Skype hook-up. Coaching fee is TBD by the individual coach.**

Peter Barnett, MD	University of Nevada	CA	pbarnettmd@gmail.com	(505) 263-2854
Monica Broome, MD	IHC Master Trainer; University of Miami	FL	mbroome@med.miami.edu	(305) 662-5603
Cecile Carson, MD	Integrated Health Institute	NY	carsoncecile@gmail.com	(585) 271-5650
Nancy Corkle, MEd	IHC Master Trainer	GA	ncorkle@gmail.com	(262) 339-3544
Cathy Dubé, EdD	Brown University	RI	catherine_dube@brown.edu	(401) 246-0776
Jeanne Marie Foster, MHA	IHC Master Trainer	NC	jeanne.marie@Facilitatehealth.org	(336) 287-9696
Elizabeth Morrison, LCSW, MAC	IHC Master Trainer	CA	emorrisontraining@icloud.com	(209) 769 3923
Dan O'Connell, PhD	IHC Master Trainer	WA	danieloconnell01@comcast.net	(206) 282-1007
Barbara Patterson, JD	IHC Master Trainer	DC & WI	barbarahpatterson@gmail.com	(414) 704-1897
Sandy Reifsteck, RN, MS, FACMPE	IHC Master Trainer	IL & AZ	swr4007@aol.com or sreifsteck@healthcarecomm.org	(217) 417-4489