



## IHC Patient-Centered Communication Series:

### **Clinician-Patient Communication to Enhance Health Outcomes (CPC) Faculty course (Train-the-Trainer)**

#### **Overview**

The benefits of effective communication between clinicians and their patients are far-reaching and well documented. Individual clinicians and provider organizations increasingly recognize the power of effective clinician-patient communication to support helpful therapeutic relationships and the benefits that accrue to patients and providers. With the many and growing pressures for improved care outcomes, higher patient satisfaction, reduced litigation and increased job satisfaction among providers, organizations are developing a variety of strategies to increase their capacity to support clinicians in their quest to communicate more effectively with patients. IHC's ***Clinician-Patient Communication to Enhance Health Outcomes (CPC) Faculty course*** is expressly designed to build organizational capacity for clinician training.

Effective patient-centered communication skills are learnable skills. Many clinicians have had limited exposure to explicit and intentional training focused on communication and varied models for interacting with patients. Some view communication training as "soft skills": non-technical and therefore of lesser value. In fact, from the patient's perspective, excellent technical clinical skills alone are insufficient for a satisfactory experience. Patient interviews are the most common "procedure" for most clinicians; a typical clinician's career will encompass more than 160,000 interviews (AAFP 2011). Combined with sound clinical skills, effective communication raises the level of patient satisfaction in measurable—and clinically significant—ways.

IHC has published evaluative research measuring the impact of IHC workshops and professional services on physician communication behavior specific to empathic communication (Bonvicini 2009) and physician and patient satisfaction (Haskard KB 2008). In addition, IHC collects post-workshop data from workshop learners to evaluate the impact of the *CPC* 4-hour workshop on selected communication techniques learned in the workshop. This is accomplished by asking all workshop learners to complete a written behavioral plan identifying two techniques acquired during the workshop that they will practice in their patient interactions. These forms are collected and then sent back to the learners six weeks later. This "reminder" includes a link to an

anonymous survey to assess learners' application of the techniques in actual practice with observable effect. The following results were observed between 2008 and 2011:

- 75% of respondents reported a high rate of application of newly learned techniques to their clinical practice.
- 66% percent of respondents reported spending increased time listening to patients and higher personal and patient satisfaction.

The **CPC faculty course** is hosted by a wide variety of sponsors throughout North America that seek to develop or enhance in-house capacity for clinician communication training. Typical sponsors include managed care organizations, medical schools, specialty societies, government agencies, medical groups and hospitals.

## Audience

The **Clinician-Patient Communication to Enhance Health Outcomes (CPC) faculty course** is designed for healthcare professionals including clinicians in all specialty areas, educators, behavioral specialists and others who are committed to promoting patient-centered care. The course is targeted toward professionals involved with professional development within their organizations and who will teach the **CPC** workshop.

Workshops can accommodate 6-30 learners to ensure individualized attention and optimal small group learning.

## Content

The **Clinician-Patient Communication to Enhance Health Outcomes (CPC) faculty course** employs IHC's highly effective "train-the-trainer" model. Attendees of the course receive expert guidance to become faculty members for IHC's **Clinician-Patient Communication to Enhance Health Outcomes (CPC)** workshop.

The **Clinician-Patient Communication to Enhance Health Outcomes (CPC) workshop** is IHC's flagship training program. The content, principles and model used in this workshop are supported by extensive research conducted during the past thirty years in patient-centered care, healthcare communication and intra-team communication. It provides a conceptual model and specific techniques that guide clinicians to communicate in ways that will encourage patient partnership, promote positive health outcomes and enhance patient and providers satisfaction.

**CPC** presents a patient-centered model of complete clinical care that distinguishes between two essential clinician tasks: biomedical and communication tasks. Biomedical tasks are comprised of the technical clinical skills, whereby clinicians "find and fix" patients' problems. Biomedical tasks are the major focus of formal clinician education and ongoing continuing education. Communication tasks, by contrast, have traditionally received less focused attention in clinician

education and training. The CPC workshop promotes IHC's 4 E communication model that includes the following:

- **Engaging** the person,
- **Empathizing** with their concerns,
- **Educating**, using clear, concise language and checking for understanding, and
- **Enlisting** the patient as a partner and focus of the care.

The workshop, which is presented in its entirety at the outset of this faculty course, is a fast-paced interactive program that gives participants opportunities to practice key skills and techniques. Participants view video encounters between staff and patients and work in small groups on skills that apply in a variety of realistic situations.

## Expectations

The **Clinician-Patient Communication to Enhance Health Outcomes (CPC) faculty course** is a 3.5-day program conducted over four consecutive days. It is *intense and interactive*, with substantial experiential learning opportunities in large and small group exercises. To minimize distraction, IHC recommends that learners be freed from additional work-related tasks for the duration of the training.

Learners are expected to participate in all large and small group exercises and discussions. Learners consistently report high value receiving feedback from their peers and sharing their experiences in this structured and safe environment. We also expect learners to commit to teach the half-day **CPC** workshop once they are trained to do so.

Throughout the CPC faculty development course, IHC Senior Trainers and small group facilitators provide feedback to learners and assess their readiness to conduct CPC workshops. In the event that additional support and coaching is needed prior to teaching the CPC workshop, IHC Senior Trainers are available to provide such personalized support and guidance. Individualized support is scheduled separately and subject to additional fees.

All IHC faculty must use the most up-to-date version of IHC's copyrighted curricular materials for the course(s) they are trained to lead.

## Learning Objectives

By the end of the faculty course, learners will:

1. Gain background knowledge and facilitation skills required to conduct the **CPC** workshop at their institution,
2. Develop improved clinical communication skills and the ability to role model those skills through simulated patient sessions,
3. Identify and practice a coaching and feedback model for use with learners and colleagues, and
4. Develop a plan for integrating IHC workshop materials and training to meet the professional development and CE needs at their institution.

## Methodology

Participants practice presenting components of the **CPC** workshop and provide feedback to one another. They practice engaging their audience in activities and maintaining the flow of the workshop.

Participants are exposed to the theory and practice underlying graduated involvement, consistent with best practices in adult learning. All of the **CPC** workshop activities involve all participants. From a learning standpoint, the theoretical grounding of this approach can be found in the research on cooperative learning and, more recently, action learning.

IHC will provide each learner with a completed set of educational materials to teach the **CPC** workshop: a teaching manual (with slide scripts, facilitation guides, teaching strategies and tools), training video vignettes, PowerPoint slide deck, workshop workbook with annotated bibliography, and a carrying bag.

## Faculty

The faculty members who teach the **Clinician-Patient Communication to Enhance Health Outcomes (CPC) faculty course** are experienced educators designated as IHC Senior Trainers. Senior Trainers have extensive clinical and clinical teaching experience.

## CME

The Institute for Healthcare Communication takes responsibility for the content, quality and scientific integrity of this CE/CME activity.

The Institute for Healthcare Communication is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Institute for Healthcare Communication designates the ***Clinician-Patient Communication (CPC) faculty course*** for a maximum of 26.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The Institute for Healthcare Communication is accredited by the American Academy of Family Physicians (AAFP) to provide prescribed credit for continuing medical education programs. This activity has been reviewed and is acceptable by the American Academy of Family Physicians.

Continuing education (CE) credit may be available to non-physician participants. IHC will provide a certificate of completion, which can be submitted to learners' respective accrediting organizations. IHC is pleased to provide any necessary documentation to help learners gain CE credits for completion of this activity.

**For further information, please contact:**

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## Notes

AAFP. "Table 6: Average Number of Family Physician Patient Encounters Per Week by Setting (as of April 2011)." AAFP. Apr 2011. <http://www.aafp.org/about/the-aafp/family-medicine-facts/table-6.html> (accessed Jun 21, 2013).

Bonvicini, K.A., Perlin, M.P., Bylund, C.L., Carroll, J.G., Rouse, R., & Goldstein, M.G. "Impact of communication training on physician expression of empathy in patient encounters." *Patient Education and Counseling* 75 (2009): 3-10.

Haskard KB, Williams SL, DiMatteo MR, Rosenthal R, White MK, Goldstein MG. "Physician and patient communication training in primary care: effects on participation and satisfaction." *Health Psychol* 5 (2008): 513-22.