

CLINICIAN-PATIENT COMMUNICATION: *E4 Model for Virtual Video Visits*



LEARNING OBJECTIVES:

1. Recognize the value of Virtual Video Visits (VVV) in connecting with patients
2. List three patient outcomes which are impacted by the quality of clinician communication
3. Identify the four key communication techniques (E4 model) for VVV interactions



Over three decades of research evidence has demonstrated that a clinician's ability to explain, listen and empathize can have a profound effect on a patient's health outcomes, including diagnostic accuracy, adherence, satisfaction and malpractice risk. Telemedicine using virtual video visits (VVV) has historically been used to enhance healthcare access for patients living in rural and remote areas; however, we are now seeing exponential growth of its utilization since the COVID-19 pandemic.

Virtual video visits are time and cost effective while ensuring social distancing patients' and providers' safety from viral infection. One of the main concerns regarding virtual video visits is that it doesn't allow for the same clinician-patient connection as is present in office visits. Virtual video visits can remain personally engaging by using essential communication skills such as listening to patients, building rapport, providing adequate time for patient's questions, and enlisting patients as partners in decision-making.

The Institute for Healthcare Communication (IHC) is introducing its newest CME/CE accredited online course offering four 1-hour modules of best practices to optimize virtual video visit interactions. A preview of the online course is presented in the Premises Video. This course is based on IHC's evidence-based E4 Communication Model which is currently adopted by over thirty healthcare systems in the US, Canada and overseas, reaching over 87,000 clinicians since 1989. Through brief presentations, demonstration videos and engaging learning techniques, each module will delve into the E4 model (Engage, Empathize, Educate, Enlist) to increase clinicians' comfort and confidence in online interactions.

ACCREDITATION: The Institute for Healthcare Communication (IHC) takes responsibility for the content, quality and scientific integrity of this CME/CE activity. IHC 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 to Enhance Health Outcomes for Virtual Video Visits (CPC for VVV) internet enduring material* for a maximum of **4** AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

2020 CME CREDIT FOR PHYSICIANS: This activity has been approved for **4.0** AMA PRA Category 1 Credits™



REASONS WHY YOU SHOULD ENROLL IN THIS IHC SERIES:

- **Virtual video visits are here to stay!** In addition to ensuring continuity of care and safety for all, they are convenient, flexible and time-efficient for patients and providers.
- **Improve patient satisfaction:** Learn about the foundational skills in the E4 Communication Model that help patients to feel seen, heard, understood and enlisted in the decision-making.
- **Expand your clinical communication toolkit:** Strengthen your communication skills and acquire new tools and techniques to make virtual video visits optimally effective and efficient.
- **Gain telemedicine confidence:** Learn technical and communication skills to address common telemedicine challenges and apply nonverbal techniques to enhance your patient interactions.



YOUR SPEAKERS:



Michael R. Marks
MD, MBA, FAAOS

Dr. Marks is multi-faceted physician and business executive who brings more than 30 years of expertise drawing from his broad leadership experiences.

Dr. Marks is a Board-Certified Orthopaedic Surgeon, having completed his orthopaedic residency at George Washington University and spine fellowship at the Cleveland Clinic Foundation. He was the Vice President of Business Development for Norwalk Hospital in Connecticut and is currently the Senior Medical Director of Relievable MedSystems. In 2001, he obtained his MBA from the University of Tennessee to acquire the skills necessary to meet the healthcare challenges of the 21st Century.

For more than 15 years, he has been a communications mentor for the Institute for Healthcare Communications providing instruction in three communication skill courses (Clinician-Patient Communication, Strangers in Crisis, and Disclosing Unanticipated Medical Outcomes) including the development of virtual video visits (telemedicine) webinars that are necessary for today's clinicians.



Dwight W. Burney III
MD, FAAOS

Dr. Burney is a retired board-certified orthopedic surgeon in New Mexico who served as the Chair of the Board of Councilors, Chair of the Membership Committee, and Chair of the Communication Skills Mentoring Program for American Academy of Orthopaedic Surgeons. He was a founding partner in New Mexico Orthopaedic Associates, the largest orthopaedic subspecialty practice in New Mexico.

Dr. Burney is a graduate of Stanford University, received his medical degree at the University of Nebraska College of Medicine and his orthopaedic residency at the University of New Mexico School of Medicine. He completed a fellowship in orthopaedic trauma at the University of Washington in Seattle.

For the past 14 years, he has been a senior communication skills trainer for the Institute for Healthcare Communication, and has co-led IHC faculty courses.

MODULE 1: *E1 ENGAGE YOUR PATIENT*

LEARNING OBJECTIVES:

1. Identify the technical and nonverbal requirements for conducting effective Virtual Video Visits (VVV)
 2. Name 3 Core Communication Skills for engaging with patients
 3. Commit to using ONE learned skill in my virtual video interactions with patients
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Module 1 begins with a presentation of the various “TELE” terms and transitions to recapping a Frustrations Exercise that was introduced in the Premises Introductory Video. A checklist is provided that includes tips for the physical and technical settings that are conducive to connecting with your patient. The concept is that successful patient-centered care requires utilizing biomedical skills in conjunction with the E4 Model of Communication. This module presents the skills and techniques for the first E of the E4 Model: E1 - **Engage** with your patient. The module content offers a close examination and use of the tools and techniques to build patient rapport starting with welcoming rituals, coaching your patient through the technology, time-saving agenda setting, and summarizing. Finally, a simulated clinician-patient virtual video visit is shown for learners to identify effective clinician communication skills specific to E1 (Engage your patient).



MODULE 2: E2 EMPATHIZE WITH YOUR PATIENT

LEARNING OBJECTIVES:

1. Recognize opportunities during my VVV with patients to demonstrate empathy
 2. Practice at least ONE verbal and ONE nonverbal technique to express empathy with patients
 3. Commit to using ONE learned skill in my virtual video interactions with patients
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Module 2 provides a deeper exploration into VVV skills and techniques for the second E of the E4 Model: E2 - **Empathize** with your patient. The module presents scientific evidence demonstrating that clinician's empathic communication leads to increased patient satisfaction, adherence and health outcomes. Learning how to connect with a patient and display empathy is a skill that all providers must be able to express regardless of the delivery format. The skills associated with conveying empathy in virtual video visits are key to success as a telemedicine provider. Identification and elimination of common barriers to empathy expression during VVV is covered. In addition, examples of empathy both verbally and nonverbally are demonstrated via presentation and through video simulation.



MODULE 3: E3 EDUCATE YOUR PATIENT

LEARNING OBJECTIVES:

1. Recognize the importance of assessing patient understanding
 2. Demonstrate the educational tool of Ask-Tell-Ask
 3. Commit to using ONE learned skill in my virtual video interactions with patients
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Module 3 provides a deeper exploration into VVV skills and techniques for the third E of the E4 Model: E3 - **Educate** your patient. The module content highlights scientific evidence showing that patient misunderstanding contributes significantly to non-adherence, adverse outcomes, patient dissatisfaction and malpractice risk. Furthermore, patient misunderstanding can go unrecognized by the clinicians if they assume their communication has been understood as intended. Barriers to education are presented. The biggest obstacle to patient education is the use of technical words and jargon and failure to check to assess patient understanding. Patient education in virtual video visits employs many of the same communication approaches and techniques recommended for effective face-to face visits, with specific verbal and nonverbal caveats. The use of questioning techniques, such as asking for self-diagnosis, is advocated to communicate respect and to underscore how the clinician-patient relationship has evolved into an active collaboration. Finally, practice-enhancing tools such as Ask-Tell-Ask is demonstrated with examples via presentation and video simulation to encourage immediate VVV practice application.



MODULE 4: ENLIST YOUR PATIENT

LEARNING OBJECTIVES:

1. Identify the relationship between patient adherence and shared decision-making
 2. Practice at least ONE verbal tool to explore patients' values and preferences
 3. Commit to using ONE learned skill in my virtual video interactions with patients
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Module 4 concludes the E4 Model. It provides an exploration into VVV skills and techniques for the fourth E of the E4 Model: **Enlist** your patient as a partner. The module content underscores the research showing that discussing patient-identified goals as a starting point for healthcare decision-making leads to improved patient adherence. Without shared decision-making, there is greater risk of non-adherence. Skills development includes tools and techniques which invite the patient to collaborate in decision-making in virtual video visits. This is accomplished through verbal prompts such as asking specifically about goals of care and exploring what factors in the patient's life may affect adherence. Understanding your patient's goals for care is an essential element of shared decision-making, significantly improving the likelihood of patient commitment and adherence. The module addresses the virtual video visit closure process such as clarification of care plan with script suggestions for expression of hope, as appropriate. Finally, the module addresses the newly coined phrase of "Virtual Video Fatigue," with suggestions for prevention and self-care.



ABOUT THE IHC:



The Institute for Healthcare Communication (IHC) has been a leader in healthcare communication skills training since 1987. IHC's accredited programs advance the quality of healthcare, with measurable benefits for patient satisfaction, clinician career satisfaction, patient health outcomes and durable relationships of trust.

For more information, please visit <https://healthcarecomm.org/>

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