I. **Effective Communication**

The competent graduate demonstrates effective verbal, nonverbal, and written communication skills in a wide range of medically-related activities including patient care, consultation and collaboration with colleagues and coworkers, and teaching and/or presentations in the medical arena. The graduate demonstrates effective clinical communication skills necessary for the competent care of patients and their families including rapport-building, active/responsive listening, therapeutic relationship skills and patient education and counseling skills.

Criteria for Assessment

Communication skills being assessed must be defined in observable, identifiable, behavioral terms. Ideally, skills should be based on a theoretical model or a practical application relevant to medicine. Models can be derived from theory and research, or can be derived from widely accepted practice-based behaviors. For example, case presentations in problem-based learning can be structured to reflect case presentations residents prepare for attendings. The model used should be explicit and specifically defined in terms of its structure and component skills. Assessment should reflect the structure and skills in the model.

Clear applicability of skills to the roles and responsibilities of physicians and their practice should be presented. Linkages between key communication skills and professional responsibilities of physicians should be explicit. Goals and objectives for communication skills teaching and learning should be clearly stated and communicated effectively to students.

Specific communication skills should be assessed separately. Although an “overall impression” score may provide some insight into the performance of a student, in order for assessment to be more objective and meaningful, this overall impression must be coupled with specific feedback on individual skills.

Methods of assessment, how often student skills are assessed and the type of observation (taped, live observation, simulated interaction, group presentation, etc.) should be clearly defined and equally applied to all students.

1. Uses written language effectively

   Employs skills for appropriate, comprehensible, organized and legible written communication for medical tasks including:

   - written history and physical
   - progress notes
   - discharge summary
   - discharge instructions
   - prescriptions
   - hospital orders
   - inter-agency plan of care
   - case report/poster/scientific article
   - letters to patients and/or families

2. Uses verbal and nonverbal skills effectively

   Uses verbal language effectively in a sensitive, comprehensible, organized and audience-appropriate manner. Employs effective nonverbal skills to convey appropriate effect and to facilitate an effective interaction. Skills may be demonstrated in the context of medical tasks including:

   - doctor-patient interactions
     - history-taking and information gathering
     - screening and patient assessments
     - counseling, patient education and advising
     - communication during exam/diagnostic/treatment procedures
     - telephone communication
• communication with families
  - education, counseling and advising
  - negotiating/mediating family decision making

• communication with peers and colleagues
  - effective group participation and input
  - oral case presentations
  - “curb-side” and telephone consultation
  - interpersonal skills/effective collaboration
  - clinical team meetings

3. Employs effective listening skills

Uses active and responsive listening skills, accurately interpreting both verbal and nonverbal messages while facilitating effective communication. Skills may be demonstrated in tasks listed in #2 above.

4. Is sensitive and responsive to gender, ethnic, socioeconomic and other diversity in an individual’s background and/or life experience

Recognizes, respects and responds to influences in communication, meaning and beliefs regarding health and health care arising from patients’ and families’ individual and collective backgrounds. Important characteristics in an individual’s background include but not limited to: gender, age, sexual orientation, culture, socioeconomic status, race and ethnicity. Demonstrates self-awareness of one’s own culture and how it may influence or interfere with effective communication. Adjusts verbal and nonverbal approaches to enhance cross-cultural medical communication. Skills may be demonstrated in tasks listed in #2 above.

5. Demonstrates understanding and employs principles of communication

Employs principles such as confidentiality, patient autonomy, unconditional positive regard, and therapeutic aspects of the doctor-patient relationship in communication tasks listed in #2 above.

☐ Levels of Achievement

It is assumed that incoming first-year medical students will have mastered written and verbal communication skills necessary for completing an undergraduate degree. These skills include:

• writing essays, formal reports or research papers
• making presentations
• basics of interpersonal communication and interpersonal skills
• small group communication
• public speaking

Competencies in the medical curriculum will build on these basic skills acquired in undergraduate education.

Level 1: (Beginner)

The beginner/novice will meet criteria for effective communication in non-technical patient interactions following a standard protocol or with minimal medical or nonmedical content. Examples include:

• telephone hotline counseling
• participation in health fairs
• research projects with patients as subjects
• exploratory standardized patient exercises

In those settings involving patients, students will demonstrate beginner-level listening skills, and patient relationship skills. These skills can include those directly relevant to or components of more advanced communication skills as described in levels 2 and 3 below. In beginner-level patient interactions, patients will not possess any characteristics that would pose difficult challenges to the student, for example a
personality disorder or an altered state of consciousness.

Criteria for beginner level written communication include written work using the language of medicine, which serves as evidence of the ability to analyze or build insight into medical issues (e.g., interpersonal, social, policy/organizational, or scientific interpretation of phenomena in society, medicine, disease or illness). Oral presentations of these topics can satisfy criteria for verbal communication skills at the beginning level.

**Level 2:**
(Intermediate)

The intermediate student will meet the criteria for effective communication by demonstrating competence in basic clinical communication skills including:

- history taking
- patient write-ups (history & physical)
- progress notes
- professional level physician-patient relationship and listening skills
- counseling and patient education skills
- case presentation skills
- conducting a diagnostic interview
- conducting basic assessment interviews
  - mental status exam
  - alcohol and drug screening
  - functional status assessment, etc.
- physician-patient communication during physical exam and other procedures
- basic skills for interacting with families and family members.

The patient and/or family members may have certain characteristics that pose a moderate degree of difficulty for the student, such as moderate anxiety, a degree of resistance, or other communication barriers.

**Level 3:**
(Advanced)

The advanced student will meet the criteria for effective communication by demonstrating communication skills necessary for assuming responsibility for a patient’s care including:

- patient and family interactions
- interactions with peers and supervisors
- interactions with other members of the health care team

Advanced skills include specialized patient or family communication skills:

- use of translator
- telephone communication
- intermediate and advanced patient education and counseling including:
  - behavior change counseling to address risk
  - providing brief supportive counseling for depression and anxiety
  - delivering bad news, etc.
- intermediate or advanced interviews utilizing higher level interpersonal skills
  - managing difficult patients and/or difficult relationships, for example:
    - somatizing patient
    - personality disorders
    - hostile/angry patients
    - thought disorders
    - manipulative patients
    - negotiation and collaboration
- intermediate or advanced case presentation skills
- intermediate or advanced assessment interviews
  - psych screening/assessment
  - issues of sexuality/sexual function
  - domestic violence

Advanced level written communication skills include advanced history, progress notes, op notes, procedure notes, discharge instructions, dictation skills, discharge summaries etc. Note: Fourth year clinical experiences will be well suited for this skill level.