

APPENDIX C: Learning outcomes

KNOWLEDGE	
Purposes of communication in health care	<ol style="list-style-type: none"> 1. Define communication in health care 2. Describe elements of good communication 3. Define barriers to communication in health care 4. Describe the importance of communication in health care 5. List reasons for a collaborative approach to health care 6. Recognise the strengths of facilitating relationships in health care 7. Recognise the limitations of a health professional - care seeker relationship 8. Define care seeker communication and its impact on care 9. Describe the function of a health care interview 10. Describe patient-centred communication 11. Describe the characteristics of a patient-centred interaction 12. Define interpersonal relationships 13. Describe teamwork in health care practice 14. Discuss techniques of giving feedback in health care practice
Characteristics of communication	<ol style="list-style-type: none"> 15. Describe common unproductive patterns of communication (e.g. infantilising speak towards elderly individuals, paternalism, jargon) 16. Describe the purpose of written communication in health care practice 17. Describe the range of oral presentations in health care practice 18. Describe the purpose of handover 19. Describe how verbal communication can be used in health care practice 20. Describe how non-verbal communication can be used in health care practice 21. Differentiate between open ended and closed ended questions 22. Discuss communication skills that encourage participation in health care 23. Describe theories of behaviour change as they apply to health care 24. Describe skills for educating others 25. Describe skills for motivating others 26. Propose reasons for adapting communication style in different groups or environments 27. Describe authenticity as a desirable trait in communication interactions
Relationships and communication	<ol style="list-style-type: none"> 28. Identify ways to build rapport in a communication interaction 29. Discuss factors that influence potential health professional relationships with a communication partner 30. Compare and contrast different types of health professional relationships (e.g. paternalistic, collaborative) 31. Define 'appropriate detachment' in a health care interaction 32. Discuss the impact of communication partner's personal context on their experiences 33. Recognise the place for social language in a health care interaction
Emotions and communication	<ol style="list-style-type: none"> 34. Discuss the challenges associated with difficult conversations for health professional and communication partner 35. Describe skills required for communicating in difficult conversations 36. Discuss sources of error in health care 37. Define empathy 38. Describe the differences between thoughts and feelings
Communication modes	<ol style="list-style-type: none"> 39. Recognise meanings of abbreviations commonly used in medical histories 40. Recognise and discuss legal requirements of communication in health care 41. Describe rationale for recording of care seeker information 42. Describe the skills required by health care professionals when working with interpreters

CONTENT SKILLS	
Physical space	<ul style="list-style-type: none"> 43. Ask permission to enter space of communication partner 44. Use curtain/door to maintain privacy 45. Modify physical positioning appropriate to context (e.g. setting proximity, facing partner, relative height, posture) 46. Adapt physical environment to make comfortable (e.g. where possible: noise, temperature)
Opening and introductions	<ul style="list-style-type: none"> 47. Address communication partner by title and family name until preferred title has been established 48. Identify and use the communication partner's preferred form of address 49. Introduce self to those present in health care interaction 50. Explain role to those present in the health care interaction 51. Confirm names and roles of all those present in the interaction 52. Confirm knowledge of own role in subsequent health care interactions 53. Identify communication partner's preferred mode of communication
Structure	<ul style="list-style-type: none"> 54. Identify and share the purpose or rationale of interaction with communication partner 55. Gather relevant information during a health care interaction from all relevant sources 56. Guide the health care interaction from beginning to end to establish a logical flow 57. Keep the health care interaction on topic 58. Signpost the different stages of the health care interaction 59. Ask permission to proceed with different stages of the health care interaction 60. Encourage the communication partner to complete their opening statement 61. Encourage communication partner to express own story (as relevant) 62. Encourage contribution (e.g. questions, explanations or answers) from communication partner 63. Collaboratively set and prioritise agenda for interaction with communication partner 64. Continue communication with care seeker throughout physical examination/procedure (as appropriate) 65. Use a structured communication tool to communicate care seeker information with others
Explore concerns	<ul style="list-style-type: none"> 66. Explore health care seeker's motivation for seeking health care 67. Explore health care seeker's specific concerns <ul style="list-style-type: none"> a. physical b. psychological c. emotional 68. Acknowledge health care seeker's concerns 69. Explore care seeker's remaining concerns, if any 70. Explore multiple (short or long term) goals of health care seeker's family 71. Collaboratively set and prioritise goals with communication partner
Perspective	<ul style="list-style-type: none"> 72. Explore and acknowledge communication partner's perspective of current interaction 73. Demonstrate working towards a shared understanding of communication partner's experience 74. Establish health care seeker level of health literacy 75. Explore communication partner's current level of understanding of the health issue 76. Refocus communication partner's understanding in a way that relates to their current understanding

Contextual factors	<p>77. Explore the role of the health care seeker's personal context on their experience of health care system and health care concerns</p> <p>78. Engage in discussion with health care seeker's family as appropriate</p> <p>79. Identify the impact of the health issue on the health care seeker's:</p> <ol style="list-style-type: none"> a. living situation b. family relations c. family/health care seeker stress d. life style issues <p>80. Explore respectfully and without judgement the social needs of the health care seeker</p> <p>81. Explore the role of family in current and future care plans (as relevant)</p> <p>82. Demonstrate sensitivity when asking about cultural preferences for care</p> <p>83. Demonstrate respect for an individual's different personal context</p>
Diagnosis	<p>84. Explore health care seekers readiness to hear diagnosis</p> <p>85. Convey diagnostic information as desired by the care seeker</p> <p>86. Frame diagnosis in terms of care seeker's original concern</p> <p>87. Discuss realistic expectations of prognosis</p> <p>88. Explore health care seekers perception of health care investigation/testing</p>
Decision making	<p>89. Explore how the communication partner's personal context informs decision making</p> <p>90. Identify the communication partner's preference for health care decision making</p> <p>91. Explicitly invite shared decision making in the health care interaction</p> <p>92. Explicitly discuss the health professional's role in shared decision making</p> <p>93. Incorporate communication partner's perspective in decision making</p> <p>94. Recognise uncertainty in health care decisions</p>
Recommendations	<p>95. Explain rationale for health care recommendations</p> <p>96. Explain risks and benefits associated with health care recommendations</p> <p>97. Explain risks and benefits of not proceeding with health care recommendations</p> <p>98. Explore the health care seeker's willingness and ability to follow the care plan</p> <p>99. Acknowledge and problem solve adherence challenges with the health care seeker</p> <p>100. Express respect towards other professionals and their recommendations in collaborative care</p>
Education	<p>101. Explore health care seeker's readiness to undertake behaviour change</p> <p>102. Respect the health care seeker's stage of change</p> <p>103. Demonstrate strategies for helping people adopt health promoting behaviours</p> <p>104. Empower care seeker by helping to identify their own resources, strengths and coping strategies to achieve health goals</p> <p>105. Demonstrate awareness of communication partner's capacity to receive information (e.g. attentiveness, emotional state)</p> <p>106. Consider the following when sharing information:</p> <ol style="list-style-type: none"> a. identify communication partner's needs b. assemble relevant information c. orientate information to communication partner's needs d. offer information in small chunks e. demonstrate an interactive exchange f. monitor for information overload g. allow time for reflection h. reassess and/or check understanding
Closure	<p>107. Identify if the communication partner has the need to</p> <ol style="list-style-type: none"> a. contribute further b. ask further questions <p>108. Discuss process for any follow up required</p> <p>109. Clarify contact arrangements with communication partner (e.g. availability, contact details)</p> <p>110. Maintain polite pace at closing of interaction</p>

	<p>111. Summarise communication interaction prior to closure</p> <p>112. Thank those present for their time in interaction</p>
With the team	<p>113. Identify roles and expectations of team members</p> <p>114. Selectively shape working style to contribute to team</p> <p>115. Articulate information to other members of the team that is relevant to their respective roles</p> <p>116. Cooperate with members of the team as a leader or team member</p>
PROCESS SKILLS	
Characteristics of communication	<p>117. Demonstrate a friendly manner in any health care interaction</p> <p>118. Communicate with honesty</p> <p>119. Demonstrate confidence in any health care interaction</p> <p>120. Demonstrate genuine apology as required</p> <p>121. Demonstrate genuine interest in the communication partner's story</p> <p>122. Demonstrate a flexible approach by adapting communication according to unanticipated situations (e.g. recognize that a communication interaction is failing and make adjustments to rectify)</p> <p>123. Tailor communication to meet each unique health care setting</p> <p>124. Allow communication partner time to think before answering questions</p> <p>125. Allow communication partner to complete full statements without interruption</p> <p>126. Respond promptly to communication partner's questions</p> <p>127. Restate what you have heard to check own understanding with communication partner</p> <p>128. Ask communication partner to restate to check their shared understanding</p>
Relationships and communication	<p>129. Recognise health care seeker as a partner in health care interactions</p> <p>130. Work in partnership with communication partners</p> <p>131. Demonstrate a willingness to work with and learn from care seekers with different personal contexts to your own</p> <p>132. Use inclusive language in health care interaction</p> <p>133. Recognise and respect the individuality of the communication partner and others present</p> <p>134. Tailor communication to meet the unique needs of your communication partner (considering their personal context)</p> <p>135. Identify and describe an alternate team member perspective to your own</p>
Emotions and communication	<p>136. Demonstrate empathy in the following ways</p> <ol style="list-style-type: none"> a. acknowledge communication partner's feelings b. acknowledge communication partner's vulnerability c. acknowledge communication partner's difficulty explicitly d. demonstrate non-judgemental communication e. avoid using platitudes f. validate communication partner's expression <p>137. Express a willingness to help</p> <p>138. Display an unconditional positive regard towards communication partner</p> <p>139. Share/express own feelings with communication partner in response to health care issue</p> <p>140. Recognise the emotional impact of illness for the care seeker</p> <p>141. Recognise how emotion impacts on therapeutic relationships with care seeker</p> <p>142. Support communication partner's expression of feelings/emotion</p> <p>143. Express care and concern to all communication partners</p> <p>144. Articulate a plan for approaching difficult conversations</p> <p>145. Demonstrate skill in navigating difficult conversations</p> <p>146. Monitor the communication partner's emotional state (e.g. comfort/non-verbal cues/emotion) in interaction and adjust own approach to match</p> <p>147. Allow communication partner time when making difficult decisions</p> <p>148. Identify the therapeutic benefit of discussing feelings</p> <p>149. Identify communication partner's desire to discuss feelings</p> <p>150. Recognise conflicts as they arise in an interaction</p> <p>151. Demonstrate strategies for dealing with conflict in health care</p>

	<p>152. Demonstrate solution focused strategies for dealing with error, own or others, in health care</p> <p>153. Recognise own limitations when it comes to conflict or uncertainty in health care (e.g. when to seek help)</p>
Verbal behaviour	<p>154. Set own agenda for the health care interaction a priori</p> <p>155. Prepare for health care interaction by:</p> <ol style="list-style-type: none"> a. reviewing relevant information b. acknowledging previous health care encounters or health history c. preparing own self for health care interaction d. anticipate potential challenges to communication interaction <p>156. Speak at a pace that can be understood by the target audience</p> <p>157. Use intonation to modify verbal delivery</p> <p>158. Speak with clarity</p> <p>159. Speak with polite formality</p> <p>160. Explain medical terms in plain language</p> <p>161. Use questions with a single focus</p> <p>162. Use questions without leading communication partner response</p> <p>163. Use open ended questions to explore topic further</p> <p>164. Use targeted questions to clarify information</p> <p>165. Use interruptions respectfully (e.g. brings communication partner back to point)</p> <p>166. Use silence to facilitate space in a communication interaction</p> <p>167. Demonstrate verbal cues of active listening, such as:</p> <ol style="list-style-type: none"> a. back tracking b. reflecting communication partner's story c. mirroring language d. using words of encouragement e. verbally acknowledging f. paraphrasing to indicate health professionals' understanding g. interrupting minimally
Non-verbal behaviour	<p>168. Demonstrate suitable eye contact for context</p> <p>169. Use facial expression to convey own emotion</p> <p>170. Use facial expression to convey response to others emotion</p> <p>171. Use body language (including touch) to respond to emotion</p> <p>172. Demonstrate non-verbal cues of active listening, such as:</p> <ol style="list-style-type: none"> a. giving undivided attention b. nodding c. pausing d. remaining unhurried
Communication modes	<p>173. Demonstrate dialogue which is uninterrupted by writing or reading</p> <p>174. Summarise to formulate information for medical records</p> <p>175. Maintain care seeker individuality in written communication</p> <p>176. Record relevant care seeker information according to convention</p> <p>177. Deliver an organised report (verbal or written)</p> <p>178. Deliver education material based on principles of patient literacy</p> <p>179. Provide resources (e.g. written materials) in communication partner's preferred language where possible</p> <p>180. Edit written materials (online and paper) for style, spelling and grammar</p> <p>181. Use professional language in all communications</p> <p>182. Recognise limitations of family members or relatives serving as interpreters</p> <p>183. Describe the basic processes of group communication</p> <p>184. Advocate for other members' needs in a group meeting (e.g. team meeting, family meeting)</p> <p>185. Demonstrate knowledge of technologies (e.g. websites, phone applications) relevant to health care communication</p> <p>186. When posting health information online, consider:</p> <ol style="list-style-type: none"> a. how to capture your readers' attention b. credibility of the information provided

PERCEPTUAL SKILLS

Impact of self	187. Identify own preferred mode of communication 188. Recognise the impact of a health professional's own emotions and personal context on a health care communication 189. Reflect on personal comfort levels in communication interactions 190. Demonstrate awareness of own personal responses to different situations/people (e.g. recognise trigger situations that can negatively affect one's own communication behaviour) 191. Identify and name own feelings in response to a health care issue 192. Reflect on own ways of expressing emotion (such as anger or grief) 193. Write down a strategy to meet/protect own needs, while taking other people's needs into account prior to interactions 194. Demonstrate self-disclosure as a way to facilitate self-disclosure of communication partner (as relevant)
Self-evaluation	195. Develop a core belief statement about what constitutes effective health professional communication 196. Discuss continued development of communication skills throughout health professional career 197. Describe the value of reflection in developing own communication practice 198. Reflect on previous communication interactions to inform subsequent communication interactions 199. Identify strengths in own communication interactions 200. Identify areas for improvement in own communication interactions 201. Describe strategies to achieve goals in own communication interactions
External evaluation	202. Provide others with feedback on communication interactions with the aim of improvement of skills 203. Seek sources to evaluate own communication interaction with the aim of improvement of skills 204. Receive feedback on communication interactions with the aim of improvement skills 205. Use the feedback provided by others to inform subsequent communication interactions (e.g. demonstrate changes in behaviour)