Patient Centered Communication Skills Assessment

PCC Skill Dimension	Skill Rating (1=poor; 3=average; 5=excellent)				
BUILDS RAPPORT					
<i>Consider:</i> Smiles and greets patient, using patient's name; greets others in room and determines their	1	2	3	4	5
relationship to patient; maintains eye contact; body language shows interest, uses verbal comments that show interest and help continue the interaction	Comments:				
FOCUSES THE EXAM					
Consider:	1	2	3	4	5
Starts with presenting problem and asks patient to articulate any other concerns; prioritizes problems to be addressed with patient; limits number of problems to be addressed; asks patient to prioritize problems if too many for one visit; reminds patient that another visit can be scheduled to address remaining problems	Comn	ients:			
ELICITS PATIENT'S PERSPECTIVE					
Consider:	1	2	3	4	5
Explore the patient's illness experience, such as patient's idea of the problem (i.e., so, tell me about the headaches you've been experiencing); how patient feels about the problem (i.e., how are your headaches quality of life?); what concerns does the patient express about the problem (what are the things that bother you the	Comn	ients:			
most about the headaches?); impact of the problem on the patient's functioning (how are the headaches affecting your daily routines?); patient's expectations for help from PCP					

COMMUNICATION

The family physician demonstrates interpersonal and communication skills that foster trust, and result in effective exchange of information and collaboration with patients, their families, health professionals, and the public.

C-1 Develops me	eaningful, therap	eutic relationship	s with patients	and families		
Has not	Level 1	Level 2	Level 3	Level 4	Level 5	
achieved Level 1					D 1 11	
	Recognizes that effective relationships are important to quality care	Creates a non- judgmental, safe environment to actively engage patients and families to share information and their perspectives	Effectively builds rapport with a growing panel of continuity patients and families Respects patients' autonomy in their health care decisions and clarifies patients' goals to provide care consistent with their values	Connects with patients and families in a continuous manner that fosters trust, respect, and understanding, including the ability to manage conflict	Role models effective, continuous, personal relationships that optimize the well-being of the patient and family	
Comments:						

PCC Skill Dimension	Skill Rating (1=poor; 3=average; 5=excellent)				
GATHERS AND SHARES INFORMATION		,			
	1	2	3	4	5
Consider:					
	Comm	<i>ients:</i>			
Uses open ended questions to gather information					
(i.e., so tell me how do you feel your pregnancy					
is going so fare; show me where your pain is the					
worst; how is this affecting you emotionally);					
uses reflective listening (i.e., so you are finding					
that you don't have the same get up and go since					
you got pregnant, what you're telling me is that					
the worst pain is on the top and back of your					
head, it sounds like this has been pretty upsetting					
for you); communicates physical findings of					
exam as exam unfolds; describes diagnosis in					
jargon free terms; encourages discussion of					
psychosocial issues related to physical findings REACHES COMMON GROUND					
<u>REACHES COMMON GROUND</u>	1	2	3	4	5
Consider:	1	2	5	4	5
Checks to see if the patient agrees with and	Comm	<i>ients:</i>			
understands the diagnosis and treatment plan;					
clearly describes what the patient will be asked					
to do as part of treatment; explores whether there					
are any barriers the patient will experience in					
following through; asks patient for any questions					
regarding visit prior to closing					
Instructions: Add Up All Circled Numbers	Total	Raw Scor	re:		
Milestone C-1 Score (See Scoring Key for			Score (Se	e Scoring	Key for
Rating Scale Description)			escription	0	· •
Circle Proficiency Level (circling 2 adjacent	-		-	·	2 adjacent
ratings is permissible):		s is perm	•	. 0	Ť
Did not attain Level 1 proficiency	Did not attain Level 1 proficiency				
Level 1 proficiency		1 proficie			
Level 2 proficiency		2 proficie	•		
Level 3 proficiency (minimum passing level)		-	•	imum pa	ssing level)
Level 4 proficiency		4 proficie	•		
Level 5 proficiency	Level	5 proficie	ency		

Has not	nunicates effective	Level 2	Level 3	Level 4	Level 5
achieved	Level I		Level 5	Lever	Levers
Level 1					
	Recognizes that	Matches	Negotiates a visit	Educates and	Role models
		modality of	agenda with the	counsels patients	effective
	respectful	2			
	communication	communication	patient, and uses	and families in	communication
	is important to	to patient needs,	active and	disease	with patients,
	quality care	health literacy,	reflective	management and	families, and the
	Identifies	and context	listening to guide	health promotion	public
	physical,	Organizes	the visit	skills	Engages
	cultural,	information to be	Engages patients'	Effectively	community
	psychological,	shared with	perspectives in	communicates	partners to
	and social	patients and	shared decision	difficult	educate the
	barriers to	families	making	information, such	public
	communication	Participates in	Recognizes non-	as end-of-life	
	Uses the medical	end-of-life	verbal cues and	discussions,	
	interview to	discussions and	uses non-verbal	delivery of bad	
	establish rapport	delivery of bad	communication	news,	
	and facilitate	news	skills in patient	acknowledgement	
	patient-centered		encounters	of errors, and	
	information			during episodes of	
	exchange			crisis	
	0			Maintains a focus	
				on patient-	
				centeredness and	
				integrates all	
				aspects of patient	
				care to meet	
				patients' needs	
comments	5:				

*Adopted from Patient Centered Communication form developed by Larry Mauksch at the University of Washington Department of Family Medicine