Henry Ford Health System

Physician Engagement: A Unique Approach to Improving Physician Communication Skills

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A story of Compassion
Historical Data: Annual Trend in Physician Communication Quality

50th %tile: 92.6
Physician Communication & Peer Support—How It All Began

• Found Early Adoptors – All Cardiologists
• Shared Stories of Positive Change
• Showed Shadow Data Success
• Asked for Some to Teach
• Positioned Selves as Elbow Support/Partners
Core Building Blocks of the Provider Communication Strategy

CLEAR Communication
Shadowing

CLEAR Fundamentals of Communication Workshop

CLEAR Advanced Conversations
Experiential Workshops

Sustainment
Skill maintenance and support

Connect
Listen
Empathize
Align
Respect
Two Voices

**Patient’s Voice:**

**EMOTIONAL**
- Wants to tell the “story” of the illness
- Is concerned with the personal meaning of the illness
- Speaks in response using What-When-How questions (open-ended)

**Provider’s Voice:**

**COGNITIVE**
- Wants to obtain a history quickly
- Asks yes/no questions to get the “facts”
- Constructs a differential diagnosis...Find it and Fix It
CLEAR Fundamentals Roadmap

SKILL 1: Create Rapport Quickly
SKILL 2: Set the Agenda
SKILL 3: Address Emotions with Empathy
SKILL 4: Share Information with ASK-TELL-ASK

CLEAR Conversations

- Builds on fundamentals course and commonly missed skills from shadowing
- Roadmaps for the most challenging conversations
- Experiential patient and family discussions utilizing improvisational actors
- Safe practice and real-time feedback
Experiential Learning Road Map:

- Communication Challenge
- Time Out
- Positive Reflection
- Takeaway
- Reframe
Core Building Blocks of the Provider Communication Strategy

- CLEAR Communication
- Shadowing

- CLEAR Fundamentals of Communication Workshop

- CLEAR Advanced Conversations Experiential Workshops

- Sustainment
  *Skill maintenance and support*

- Connect
- Listen
- Empathize
- Align
- Respect
Communication Shadowing – What It Is…

• Honoring and respectful
• Through the lens of the patient
• Individualized suggestions
• Quick primer on best practices
• Improvements within your control
• Builds trust with providers
• Real-time feedback
Communication Shadowing – What It Is Not...

- An interruption in patient flow
- Punitive
- Intrusive to patients
- Imposing solutions on you
- A quick fix
Outpatient Shadow Checklist

Checklist:
• Pre-visit
• First impression
• Agenda setting
• During exam
• Any time behaviors

Resources: Dr. Frankel – “Four Habits,” Dr. Beeson-Sharp Medical, Advisory Board, Cleveland Clinic, Brigham Health, and Press Ganey Solution Starters
Individual Shadow Report

**Purpose:** to show trends in the most to least consistent behaviors, and provide comments on what was said or done and what might be more effective to say or do.

**Contents:**
- Trends of observations
- Shadow observer comments
- Individual Press Ganey scores
- Communication job aid
<table>
<thead>
<tr>
<th>Patient 1</th>
<th>Patient 2</th>
<th>Patient 3</th>
<th>Patient 4</th>
<th>Patient 5</th>
<th>Total</th>
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<td>Compliance Rate</td>
<td>Compliance Rate</td>
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**Physician Shadow Header**

**Physician Name:**

**Shadower Name:**

Date of Visit if different than date of entry - Otherwise leave as N/A.

Reason for Visit:

Pre-Visit Physician reviews patient medical history prior to visit?

Physician knocked on door (or announced self) & paused 2 seconds before entering?

If there was a delay, physician acknowledged the delay in seeing the patient? (e.g., "I hope your wait was not too long").

**First Impression**

Did physician introduce self?

Did physician respect eye contact?

Did physician respect patient's touch?

Did physician offer to help patient dress?

Did physician introduce themselves to everyone in the room?

Did physician explain who they are (in structure) & on Dr. Name is a Senior Staff Cardiology/Heart Doctor?

**Agenda Setting**

ASK: Did Physician ask (open-ended question) "how can I help you today?"?

PAUSE: Did Physician pause to let patient speak without interruption (2 minute rule) at some time during visit.

TELL/Agenda: Did Physician explain what will be done today and negotiate the agenda? (Today's Agenda)

PRE-MEETING SUMMARY: Did Physician use "summarize" of patient medical history to share with patient?

**During the Exam**

Tell/Exam: Did Physician explain what he/she is doing during exam, the benefits to the patient, and what is found upon exam?

TELL/Next Steps: Did Physician explain the plan (what comes next) in clear language without jargon so patient can understand?

2nd ASK/Question: Did Physician ask, "Do you have any questions about today's visit?"

2nd Ask/Plan: Did Physician ask patient to "teachback" to assess patient's understanding of the plan?

Closing Thanks: Did Physician thank the patient for trusting self with their care?

**Anytime Behaviors**

NURSE: Did Physician recognize and respond to emotion/difficulty of patient circumstance? (e.g., "It sounds like this has been [name emotion] for you").

ALIGN: Did Physician paraphrase patient's communication (e.g., "Sounds like a once a day pill is really important to you").

Handwashing: Did Physician wash hands just before exam & explain why? (e.g., "For your safety, let me wash my hands").

Talk Up: Did Physician find an opportunity to "talk up" someone/thing in the clinic/health system?

**Q: Did Physician do an opportunity to "talk up" someone/filing in the clinic/health system?**
Department Shadow Debrief Meeting

- Tier 1: Consistent behaviors
- Tier 2: “Just Do It” behaviors
- Tier 3: Behaviors needing skill building
- Aggregate shadow data and patient satisfaction data
- Individual behaviors = YES; individual data = NO
- Didactic on one Tier 3 behavior
- Next steps for sustainment
Feedback on Physician Communication Curriculum

100% Agreed that CLEAR training should be required for all HFH faculty and trainees

“Inspirational program that has the potential to change patient care”

“Uncovers weakness we might not have known we had”

“Simulated family members were outstanding, completely believable, making the experience authentic”

“Masterful delivery of content, very safe atmosphere, very pertinent topic”

“Really all of the tips from the CLEAR Fundamentals were helpful. I definitely think about setting the agenda with every patient.”
What’s Next

- Sustainment: re-shadows, in-service drills
- Inpatient shadowing
- Resident shadowing
- End-of-life conversation shadowing
- Peer-Partner mentor program
Cardiology – Physician Communication Quality
<table>
<thead>
<tr>
<th>Domain/Question</th>
<th>Non-shadowed Change*</th>
<th>Shadowed Change*</th>
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<tbody>
<tr>
<td>Overall Doctor Rating 0-10</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Recommend this provider office</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>PHYSICIAN COMM QUALITY</td>
<td>-1</td>
<td>10</td>
</tr>
<tr>
<td>Give easy to understand instruction</td>
<td>-2</td>
<td>8</td>
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<tr>
<td>Know important info medical history</td>
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<td>11</td>
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<tr>
<td>Provider expl in way you understand</td>
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<td>10</td>
</tr>
<tr>
<td>Provider listen carefully to you</td>
<td>-5</td>
<td>4</td>
</tr>
<tr>
<td>Show respect for what you say</td>
<td>-5</td>
<td>6</td>
</tr>
<tr>
<td>Spend enough time with you</td>
<td>4</td>
<td>11</td>
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</table>
“The secret of the care of the patient is in caring for the patient.”

Francis Peabody

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