

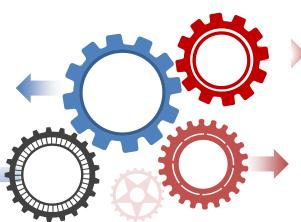


Human Factors in Patient Safety: Key Features

Evidence –based 'pillars' with clearly defined competencies

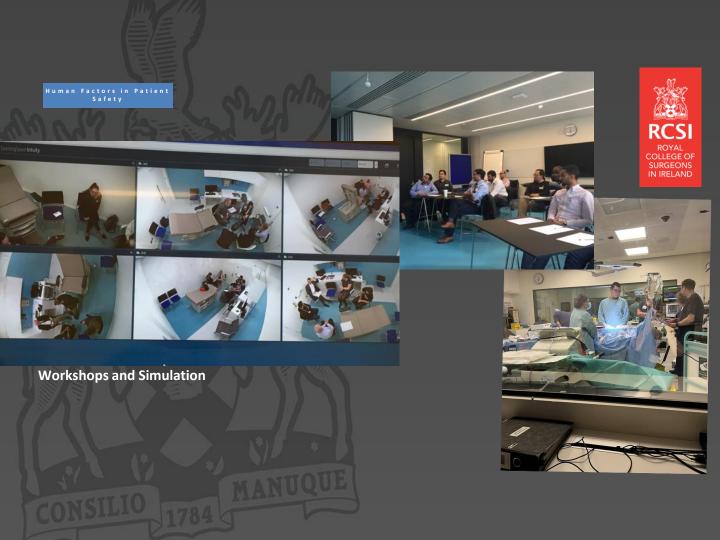
- Attitudes ,behaviours and performance
- Cognition and problem-solving
 - Professionalism
 - · Safety management systems
 - Communication
 - Teamwork
 - Leadership
 - Error in Healthcare

CPD training available for doctors currently not on training programmes and consultants



Communication and negotiation skills assessed at the end of years 1 and 2 of PG training: High stakes assessments

Each trainee attends for approximately 18 days training over 8 years





Online PG
Diploma/MSc. in
Human Factors in
Patient Safety



Course Details

This inter-professional part-time online programme in Human Factors and Patient Safety is for all healthcare professionals involved in the care of hospital patients.

Scholars attend online interactive sessions and workshops **one day per month**. The rest of the multi-disciplinary programme including didactic teaching, discussion boards, reading, and resources are offered online, which you can access it in your own time.

Modules

Year 1

Year 2

- Error and Safety in Acute Healthcaresearch Dissertation
 Personal Effectiveness and Non-technical Skills
- Leadership of Process and Quality Improvement
- Professionalism and Advanced Communications

Research Methods

Scan for more information







Eligibility Criteria

The programme is suitable for surgeons, physicians, anaesthesiologists, emergency medicine doctors, obstetricians, pharmacists, nurses and midwives working in the hospital setting, as well as safety and quality managers.

RCSI Safe and Sound Podcasts, Series 1 and 2.



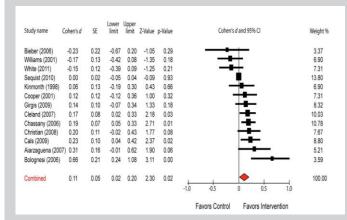


Objectives for Today

- Describe the key skills of effective communication in healthcare
- Identify the particular communication skills essential to use with emphasis in difficult conversations
- Appreciate emotions and their meaning
- Recognise the importance of the use of empathy skills in difficult conversations



Problem/Diagnosis	Outcome
Fibromyalgia	Pain, dep., functioning
Smoking	Smoking cessation
Osteoarthritis	Pain
Diabetes	BP, serum levels
Diabetes	BP, serum, Psychosocial
Hypertension	ВР
Cancer	Anxiety, Depression
Asthma	Asthma QoL
Osteoarthritis	Pain
Diabetes	Weight loss
Lower resp. infection	Return Consultations
Somatic complaints	Quality of Life
Obesity	Weight loss



OPEN ACCESS Freely available online



The Influence of the Patient-Clinician Relationship on Healthcare Outcomes: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

John M. Kelley^{1,3}*, Gordon Kraft-Todd¹, Lidia Schapira^{1,4}, Joe Kossowsky^{2,5,6}, Helen Riess¹

Empathy and Relational Science Program, Psychistry Department, Masschusetts General HospitalHarvard Medical School, Boston, Masschusetts, United States of America, 2 Program in Placebo Studies and the Therapeutic Encounter, Beth Israel Descenses Medical Center/Harvard Medical School, Boston, Masschusetts, United States of America, 3 Psychology Department, Endicott College, Reverly, Masschusetts, United States of America, 4 Department of Medicine, Masschusetts United States of America, 4 Department of Medicine, Messchusetts United States of America, 5 Department of America, 5 Department of America, 5 Department of America, 5 Department of Clinical States of America, 5 Department of Clinical Psychology & Psychologies, Vijevsking States (States States States) and College States States States (States).





Burnout







Communication Skills Training for Physicians Improves Patient Satisfaction

Actienne Bolssy, MD, MA¹, Amy K. Windover, PhD¹, Dan Bokar¹, Matthew Karafa, PhD², Katie Neuendorf, MD¹, Richard M. Frankel, PhD^{1,3}, James Merlino, MD⁴, and Michael B. Rothberg, MD, MPH⁵

Office of Patient Experience, Center for Excellence in Healthcare Communication, Cleveland Clinic, Cleveland, OH, USA, ²Quantitative Health Sciences, Cleveland Clinic, Cleveland, OH, USA, ³Indiana University School of Medicine, Indianapolis, IN, USA, ³Press Garney Associates, Inc., Chicago, IL, USA, ²Creater for Yolke pased Care Research, Medicine Institute, Cleveland, Chill. Ceveland, Chill, Chill, Chill, Chill, Child, Chill, Chill

Kelm et al. BMC Medical Education 2014, 14:219 http://www.biomedcentral.com/1472-6920/14/219



RESEARCH ARTICLE

Open Access

Interventions to cultivate physician empathy: a systematic review

Zak Kelm¹, James Womer^{2,3}, Jennifer K Walter³ and Chris Feudtner³

Association of an Educational Program in Mindful Communication With Burnout, Empathy, and Attitudes Among Primary Care Physicians

Michael S. Krasner, MD Ronald M. Epstein, MD Howard Beckman, MD

Anthony L. Suchman, MD, MA

Benjamin Chapman, PhD Christopher J. Mooney, MA

Timothy E. Quill, MD

Context Primary care physicians report high levels of distress, which is linked to burnout, attrition, and poorer quality of care. Programs to reduce burnout before it results in impairment are rare; data on these programs are scarce.

Objective To determine whether an intensive educational program in mindfulness, communication, and self-awareness is associated with improvement in primary care physicians' well-being, psychological distress, burnout, and capacity for relating to patients.

Design, Setting, and Participants Before-and-after study of 70 primary care physicians in Rochester, New York, in a continuing medical education (CME) course in 2007-2008. The course included mindfulness meditation, self-awareness exercises, nar-





Examples of your difficult conversations.....

- Cancelling appts/surgery
- Patients who are very anxious or very angry
- Angry relatives
- Breaking Bad news
- Telephone conversations
- Video conversations





Difficult Conversations

What is more critical?

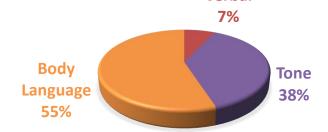


- VS
- How you transmit that information ?





How to convey meaning: Verbal and Non Communication





Becoming an expert communicator

- Non-verbals:
- Eyes
- Tone of voice to convey emotion
- Body Language, gestures





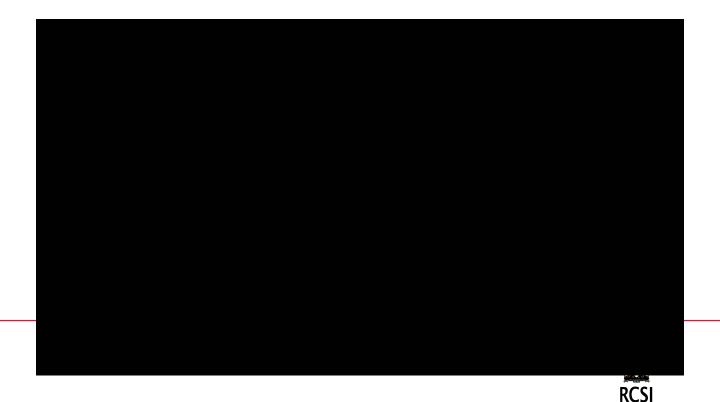
Becoming an expert communicator

- Verbal:
- Think about tone of voice: resonate
- Speak slower than usual
- Use shorter phrases





Can it all be done in 3 minutes? Dr Robinson in the ED: Spot the skills



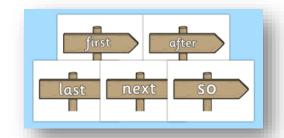
Recipe for a good conversation

- Introduction
- Starting point, no interruptions
- Empathy and apology
- Open and closed questioning
- Screening questions
- Signposting
- Non-verbal skills
- Simple language no jargon
- Periodic summarising
- Summary, 'teach back' and 'safety netting'





'Signposting'



- Im calling to give you your test results.
- I'm going to explain how the procedure will be done
- Warning shot: Im afraid I have some information for you that you may not be expecting...pause...is it ok if I continue?



Summarising and 'Teach-Back'

- 'Chunk and Check'
- Ok so I'll just go through the main points once more.
- Just to check I've explained this properly to you, can you tell me what you understand from what I've explained so far......



Empathy

 The art of demonstrating that you 'get' the emotion behind what is being expressed



How would you like it if the mouse did that to you?

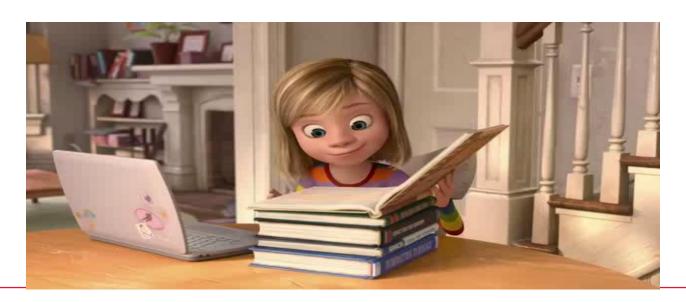


Are emotions simple or complicated?





Inside Out (Pixar)





Emotions have universal meaning



Happiness Gain something of value



<u>Sadness</u> Lose something of value



Surprise Something is happening



Anger Blocked from getting something

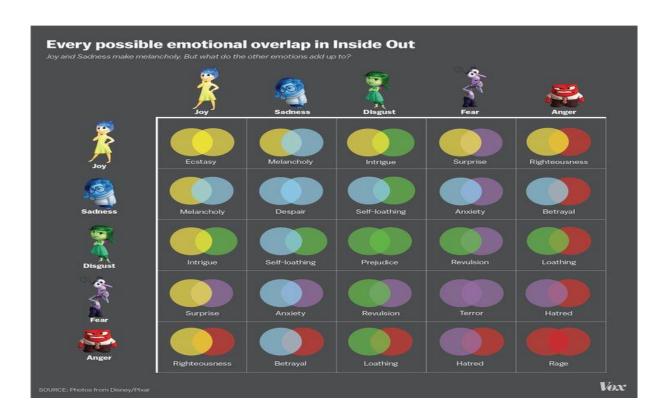


Fear Possible threat



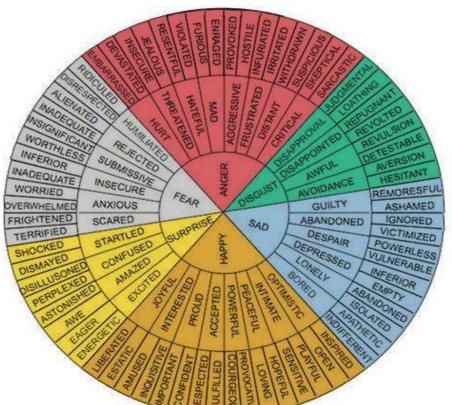
Disgust Rules are violated







Managing Emotions





Use Emotions: Specific influence of emotions

Emotion	Impact
Anger	Fight
Disgust	Reject
Fear	Avoid
Sadness	Give up
Surprise	Pay attention
Happiness	Explore



Use of Empathy

- Name and demonstrate respect for the emotion
- eg 'I can see that this is difficult for you'
- 'I can see that this delay is very frustrating'



Name it!







Empathy works!





What skills are important for the difficult conversations? When something is tough.....







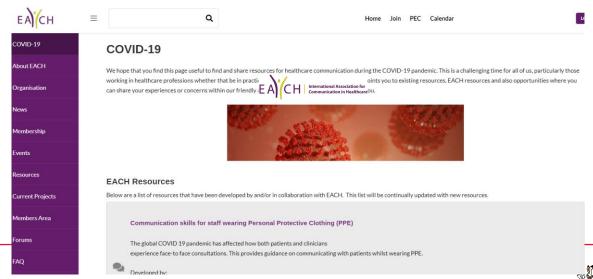
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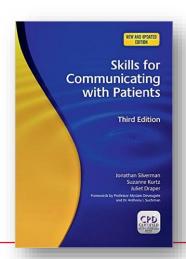


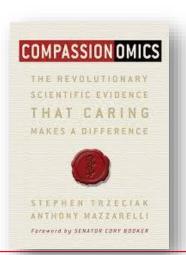






Communication and Empathy









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 PGDiploma/MSc in Human Factors in Patient Safety



01 ERROR AND SAFETY IN ACUTE HEALTHCARE

In this introductory module, we take a systems perspective on the issue of potient safety. This is a foundation module, the seminal literature is explored in depth.

EFFECTIVENESS AND NONTECHNICAL SKILLS This module will focus on the factors that contribute to

02 PERSONAL

the factors that contribute to improving personal effectiveness and team performance in healthcare.

03 LEADERSHIP OF PROCESS AND QUALITY IMPROVEMENT

In this module, the theoretical principles and the practical strategies behind QI will be explored in depth.

04 PROFESSIONALISM AND ADVANCED COMMUNICATIONS

In this module, we explore the key areas of professionalism including selationalises with patients and orthical practice. In addition, scholars are introduced to the principles and practice of advanced communication including shared decision-making, obtaining consent, open disclosure, breaking bad news and end of fille fame.

05 RESEARCH METHODS

The research methods training course will cover the full range of research methodologies Including septemental and quasi-experimental methods, quantitative descriptive!
observational research, qualitative and mixed methods research, pragmatic research, qualitative and research he process and quality improvement. Scholars will apply their skills to the development of a research protocol which will be the basis for their dissertation.

06 ADVANCED RESEARCH METHODS AND DISSERTATION

Scholars progressing to the MSC in hulans factors in Patiest Safety will undertake a research claseration in year 2. For the disseration in year 2. For the will be under the project which will be under the paper plus an extended float and progressing the publication research paper plus an extended float and progressing the pr