

Institute for Healthcare Communication

Faculty Policies and Procedures



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INTRODUCTION

Congratulations on completing IHC's Faculty Development Program. The Faculty Development Program uses a train-the-trainer model for the purpose of expanding the reach of IHC communication workshops to clinicians and members of the healthcare team in a wide variety of settings. Our belief is that there is no better way to accomplish this than to train leaders within health care settings to role model and facilitate communication training and provide coaching to colleagues and staff within their own organizations.

As you know, IHC is accredited by the Accreditation Council for Continuing Medical Education (ACCME), and the American Association of Family Physicians (AAFP) to provide prescribed credit for continuing education programs to physicians. In addition, several IHC workshops have been accepted for contact hours for continuing education for nursing through IHC's co-provider relationship with the University of Pittsburgh, School of Nursing who is an accredited CE provider by the American Nurses Credentialing Center's Commission (ANCC) on Accreditation.

As a member of our extensive network of trained faculty, this policy and procedures manual will assist you in the planning, scheduling, and conducting IHC workshops while complying with all of IHC's policies as an accredited CE provider. Periodically, IHC will revise this manual which is available for download from our website at www.healthcarecomm.org (click on faculty workshop center). We recommend that you review it periodically and use it as a guide when setting up workshops for learners for continuing education credit (CE/CME).

The Policies and Procedures Manual contains important information on:

- Promotion of workshops.
- Preparation checklist.
- Scheduling a workshop and ordering materials (e.g., workbooks).
- Confirmation memo and pre-meeting assignments.
- Setting up the workshop site.
- Conducting the workshop.
- Policies for continuing education credit (including Standards for Commercial Support, Faculty Disclosure)
- Arranging for CE certificates.
- Use of IHC materials in contexts other than the standard CE workshops
- Policy on language, and faculty behavior
- Faculty certification process
- IHC Master Trainers

If any of us on the IHC professional team can assist you in any way, please let us know.

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IHC Master Trainers

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A. Promotion of Workshop and Recruitment of Learners

IHC workshops are attended by a diverse group of learners made up of physicians, nursing professionals, and other clinicians in healthcare settings who attend for a variety of reasons. There are those who attend because the workshop serves as a required professional development program within their organization. There are others who seek continuing education credit and/or training to enhance their knowledge and performance specific to communication skills. Occasionally, there may be a combination of learners, those that are “sent” to the program and some who attend voluntarily to enhance their professional development.

The required audience scenario may be a result of a medical director mandating that all clinicians attend a communication program. Many hospitals, residency programs and staff model health management organizations fall into this category. When this is the situation, there is really one primary “buyer”: whoever is in a position to declare that people are going to attend. Your recruitment tasks will be focused on the preliminary work with identified leaders of the organization to gain buy-in. In most situations, a direct presentation to the identified leaders is sufficient to schedule a program. One option for the presentation may include use of selected workshop slides combined with a portion of the workshop video. Keep the presentation brief and impactful (20-45 minutes) to obtain buy-in and reserve opportunity for questions and discussion. The presentation should include the learning objectives, a sampling of the workshop content such as the research evidence, while highlighting the interactive components of the workshop (through video and discussion). In addition, written descriptive workshop materials may be downloaded from the Institute website at www.healthcarecomm.org by clicking on “Courses” and “Continuing Education Workshops.”

Word of mouth, and personal experience are, as would be expected, another way for healthcare leaders to be introduced to the program. Of these, personal experience with the program is by far the best. It is usually easy to arrange for somebody to attend a workshop being given in a different location to provide an opportunity for the individual to experience the program.

When obstacles emerge, they are often logistical and administrative in nature. Each of the following questions are just a sampling of what should be addressed based on the individual institution and audience needs. How are people going to be freed up from clinic time? How much advance notice is needed to schedule the workshop to allow for sufficient clinic coverage while clinicians are in attendance? What time of day is the best time to present the program? Should all departments attend or only certain departments? Etc.

When attendance is not mandatory, the workshop recruitment task is more complex. There are several ways that recruitment can be conducted. For example, there may be built-in incentives to attend communication training such as reduced malpractice premiums. While CME/CE credit acts as somewhat of an incentive, many clinicians have sufficient access to CME/CE credits offered live and online. Thus, CME/CE credits, of themselves, do not appear to be a very powerful incentive. Personal tribute from an authority figure and/or persons of influence is extremely powerful. In a hospital setting, this may mean that the medical director goes on record in writing or verbally that he or she considers the program to be extremely worthwhile and has his or her endorsement.

If recruitment is going to be difficult, the best solution is to identify a group of between 10 and 20 clinicians who can be counted on to attend a workshop and to conduct this first workshop as an entry into the system. The goal is that these 10 or 20 clinicians will then go back and through word of mouth encourage others to attend. In taking this approach, it’s critical that a great deal of one-on-one personal effort be put into the original recruitment effort. It is not sufficient to have an administrative assistant make the telephone calls for this initial effort.

Clinicians use high status authorities as screening mechanisms to sort out the vast amount of demands that are made upon their time. The difference between a highly respected medical director and a hospital administrator in charge of clinician relationships making an appeal for attendance is tremendous.

Recruitment must be viewed as a two phase effort. The first phase is to gain the commitment of the potential participant to attend the workshop. The second phase is to work to assure the commitment is sustained and that their clinical schedule allows them to participate. This requires some additional follow-up and reminders even after someone has committed himself or herself to attend the workshop. This is especially true in the more voluntary setting.

You have three promotion devices to work with in addition to word of mouth and personal presentations to individuals or groups:

1. The individual workshop descriptions found on the IHC website:
<http://healthcarecomm.org>
2. Sample letters that have proven useful in other settings.
3. Presentation of “promotional” version of the workshop. This is a tailored abbreviated version of the workshop (e.g., CPC Grand Rounds version) that is tailored to include a sampling of workshop content (research evidence) and portions of the video presentation followed by discussion.

NOTE:

If you are planning to print promotion materials to advertise an IHC workshop you will be conducting, please include the following IHC Accreditation statements in the literature or announcement :

The Institute for Healthcare Communication (IHC) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. This workshop is designated by IHC as a continuing education activity meeting the criteria for *[insert # of hours]* in Category 1 of the Physician’s Recognition Award of the American Medical Association. IHC is accredited by the American Association of Family Physicians (AAFP) to provide prescribed credit for continuing medical education programs. This activity has been reviewed and is acceptable for *[insert # of credit hours]* by the American Academy of Family Physicians. IHC also maintains a co-provider relationship with the University of Pittsburgh, School of Nursing, accredited by the American Nursing Credentialing Center (ANCC) to provide continuing nursing education (CNE).

Updates to IHC Workshop materials (slides and workbook)

IHC makes every attempt to review workshop content (Workshop slides, videos and workbook) and provide updates on a regular basis by CME planners and the CME committee to ensure validity of content. This is assured through literature reviews, feedback from faculty learners through activity evaluations, post-workshop surveys and communication with opinion leaders. Efforts have been made to uphold a standard of remaining current with the literature through bibliography updates. IHC routinely sends updated workshop materials to all IHC “active” faculty (NOTE: IHC defines “active” faculty member as having taught an IHC workshop within the previous 24 months) without any additional monetary fee. However, for IHC “inactive” faculty members (those who have not taught an IHC workshop within the previous 24 months), receipt of updated materials can be sent upon request for a nominal fee incurred by the faculty member’s affiliated institution.

B. Workshop Preparation Checklist

- Room scheduled and booked By _____ Date _____
- IHC notified via website (faculty workshop center) By _____ Date _____
- Announcement of program distributed
(written and/or electronically) By _____ Date _____
- Workbooks ordered By _____ Date _____
- Refreshments ordered, if appropriate By _____ Date _____
- Equipment ordered and reserved (LCD, flip charts, etc) By _____ Date _____
- Room configuration & equipment
list to appropriate person By _____ Date _____
- Pre-meeting assignment mailed to learners, if
Appropriate (e.g., reading assignment). By _____ Date _____
- Faculty disclosure slide updated (via IHC website) By _____ Date _____
- IHC CE Policies reviewed to assure compliance By _____ Date _____
- CME/CE Sign-in sheet typed By _____ Date _____
- Workshop agenda written for
posting in back of room By _____ Date _____
- Arrive 30-40 minutes early
- Check equipment & room set up
- Distribute workbooks & label tent cards
- Remind learners to sign in
- Conduct workshop
- CME/DE data sheets & evaluations copied
- CME/CE cover sheet, data sheets, evaluations, and
sign-in sheet mailed to IHC By _____ Date _____

C. Scheduling an IHC Workshop and getting materials

One Month Before

1. The best time to schedule the workshop is in the morning when people are fresh. If breakfast/coffee, etc. is provided, this will send a message of welcome to your learners and facilitates beginning on time.

Most of IHC's workshops run 2-4.5 hours. However, selected workshops can be presented as a series of shorter programs, or as an extended single program with longer time for skills practice and assimilation.

Decision Point: How much time do you have, and how often? How will you present the workshop? What schedule is most conducive to the organization to reduce disruption of clinical obligations?

Decision Point: What is the maximum number of learners you will accept (we suggest 30)? What is the minimum number (we suggest 8-9)?

2. Hospitals, training centers, and hotels have to be booked in advance. A poor training facility (inadequate space, uncomfortable seating, audio difficulties, etc.) will interfere with the success of the program. Some criteria for selecting a site:
 - a. **Space.** The room must be big enough to handle a "U" shaped table format for thirty people (or size of expected audience). Space is essential to allow for seating movement in small group exercises.
 - b. **Equipment.** You will need a laptop computer, an LCD projector with a remote control, a projection screen, and a large flip chart (approximately 26 x 34) with dark markers. If you are using a DVD to play the videos player you may play them on the laptop or an external DVD player.
 - c. **Quiet.** The room should **not** have a telephone or other potentially distracting noises.
 - d. **Accessible.** People should be able to find the room easily (signage is recommended). Parking should also be a factor if learners are traveling from the outside versus held at their place of employment.
 - e. **Light.** If possible, the room should have natural as well as artificial lighting. The lights should be able to be on dimmers or able to be turned on and off in banks so that there can be some light in the room while slides and/or the video are being used.
 - f. **Layout.** Use the diagram on page 9 to instruct the site coordinator on how to set up the room for you. We suggest you give the site coordinator a copy of this diagram.
3. Enter your workshop information, e.g., date, location, etc. into the IHC website www.healthcarecomm.org under faculty workshop center. For assistance, you can also call IHC at (800) 800-5907 (USA) or fax (203) 772-1066. Even if you are not ordering materials, we encourage you to inform us of your upcoming workshop:
 - a. The date?
 - b. The number of learners expected?
 - c. Who will be teaching the workshop (name of faculty member(s))?
 - d. If workbooks are needed (and how many sets)?

- e. To whom the workbooks are to be sent?
- f. Who is to be billed for the workbooks? Is the purchase order number (not required)? Please note that IHC encourages you to place your workbook orders at least 3 weeks before the scheduled workshop.
- g. If Continuing Education (CE/CME) Units will be required?
- h. If CE/CME is required, you will be required to comply with IHC's CE policies and procedures which include providing your disclosure information into the IHC online database annually (see page 12 for instructions). Further, be sure to download your faculty disclosure slide and insert it into your workshop PowerPoint slides.

Frequently there will be someone responsible for logistics besides the faculty member. Be sure to let IHC know the name and contact information on this individual.

Two Weeks Before

- 1. Mail pre-meeting assignment, if appropriate.

One Week Before

- 1. Type CE sign-in sheet with space for signatures.

Workbook Order

To: Institute for Healthcare Communication

Fax: (203) 772-1066

Tel: (800) 800-5907

E-mail: Info@HealthCareComm.org

Date of Workshop: _____

Don't forget to enter your workshop information through IHC's website at www.healthcarecomm.org

NAME OF WORKSHOP	QUANTITY	COST	TOTAL
Candid Conversations: Talking with Female Pts. about Sexual Health		\$40.00	\$0.00
Care Not Cure: Dialogues at the Transition		\$40.00	\$0.00
Choices and Changes: Clinician Influence and Patient Action		\$40.00	\$0.00
Clinician-Patient Communication to Enhance Health Outcomes		\$40.00	\$0.00
Communication: A Risk Management Tool		\$40.00	\$0.00
Connected: Communicating and Computing in the Exam Room		\$40.00	\$0.00
Conversations at End of Life		\$40.00	\$0.00
"Difficult" Clinician-Patient Relationships		\$40.00	\$0.00
Disclosing Unanticipated Medical Outcomes		\$40.00	\$0.00
Patient-Centered Medical Home		\$40.00	\$0.00
Strangers In Crisis		\$40.00	\$0.00
Treating Patients with C.A.R.E.		\$40.00	\$0.00
Treating Patients with C.A.R.E. – Accelerated Learning Edition		\$40.00	\$0.00
Coaching for Impressive Care		\$40.00	\$0.00
Tent cards		No Charge	\$0.00
TOTAL	0		\$0.00

SHIPPING CHARGES WILL BE APPLIED TO THE TOTAL ORDER AT COST

Name of Faculty: _____	Tel: _____
Fax: _____	E-mail: _____
Contact Person: _____	Tel: _____
(if different from faculty)	
Fax: _____	E-mail: _____

SHIP TO:

BILL TO (IF DIFFERENT FROM SHIP TO):

PAY BY CREDIT CARD
CARD TYPE: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover
NAME ON CARD: _____
CARD NUMBER: _____ EXP. DATE: _____ SECURITY CODE _____
E-MAIL: _____

Special Instructions: _____

Purchase Order Number (if applicable): _____

Comments: _____

D. Setting up the Workshop Site

One Month Before

1. If applicable, be sure to enter and update your faculty disclosure information into the IHC database (see page 12).
2. Book the room well in advance. If possible, book it for one half-hour before the time you plan to begin to one half-hour after the time you plan to end. Confirm the booking a week in advance. Use the diagram on page 9.
3. If available, order refreshments you will need. We suggest a continental breakfast for a morning program that includes fruit and cold cereals as well as pastry, juice, coffee, and tea.

One Week Before

1. Confirm your room reservation. Provide the person responsible for setting up the room with instructions on how the room is to be arranged. Confirm the needed A/V material: LCD projector with remote control, external speakers, projection screen, DVD player (if using DVD to play videos), and large flip chart with dark markers.
2. Distribute the pre-conference material to all learners with a cover letter reinforcing the time schedule, the need for coverage, and the place of the site (We encourage you to do this electronically). Include information about parking and any other arrangement that are out of the ordinary.

One Day Before

1. Call the person responsible for room set-up to check to see if there are any problems. Emphasize following the set-up chart and the time requirements.
2. Call the person responsible for refreshments. Confirm menu, numbers and times.

Sample Confirmation Letter

On Your Letterhead

Date

Name
Address

Dear _____:

This letter is to confirm that _____ will be presenting the Institute for Healthcare Communication workshop on _____. The workshop will be conducted on _____ day, date, year from start time to finish time.

I will need the following equipment to present the workshop:

- One (1) LCD projector with external speakers and large screen
- Laptop computer
- One (1) DVD player (optional)
- One (1) flip chart with easel
- Felt tip markers
- Masking tape

It would be best to arrange the seating around a conference table, in a U-Shape, if possible. This will help facilitate group discussions. A room configuration chart is enclosed along with important information regarding continuing education (CME/CE) credit for the workshop.

Approximately one (1) month prior to the program you will receive copies of the workshop syllabus, pre-meeting assignment for learners, and tent cards for learners' names.

Thank you again for your interest and assistance in presenting IHC workshop on _____. If you have any questions, please do not hesitate to contact me at telephone number or e-mail.

Sincerely,

Enclosure:
room configuration

Room Configuration and Equipment List

IHC Workshop: _____

Presenter(s): _____

Date: _____ Time: _____

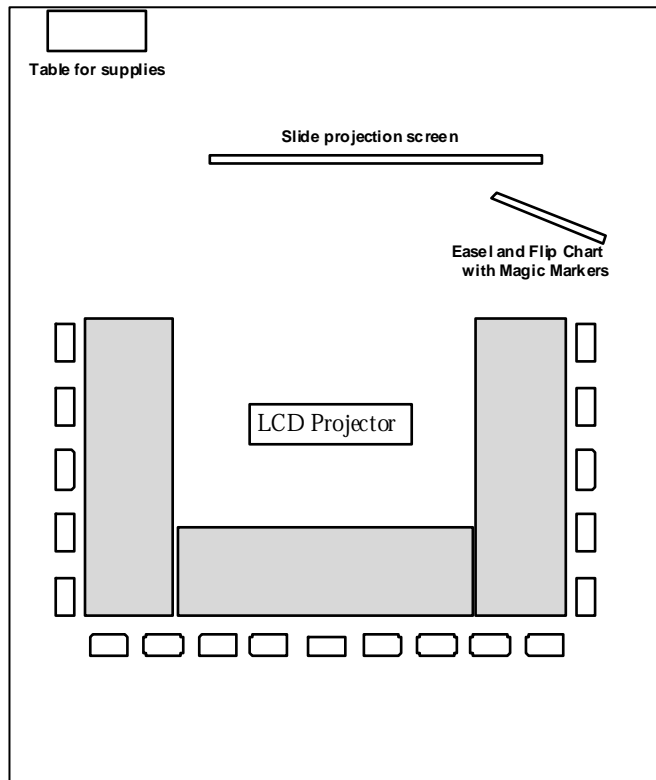
Number of learners: _____

A. EQUIPMENT NEEDED

- LCD projector (recommend external speakers)
- Screen on which to project slides
- Easel with flip chart with magic markers
- Masking tape
- Water and glasses for each participant to be placed on the tables.
- Refreshments, if provided

B. ROOM

- Needs to be oversized because we will divide into small groups during the program.
- The room should be arranged per the diagram below:



E. Confirmation Memo and Pre-Meeting Assignment

Date:

Subject: Institute for Healthcare Communication (IHC) Workshop on (Workshop title) to be held on (date of workshop)

From: (Your name)

To: (Learner name)

Thank you for registering for the IHC workshop [name of workshop] on [date] at [location]. We will begin the workshop promptly at [time] and will conclude at [time].

Because of the interactive nature of this workshop, attendance is quite limited. If it will not be possible for you to attend the entire session, please notify me at [my phone number] as soon as possible so that I may assign the space to another learner.

I am very excited about the enthusiastic response we have received to this workshop, and look forward to your participation.

Please let me know if I can be of further assistance.

Thank you.

F. Conducting the Workshop

On the Day of the Workshop

1. Arrive 30 to 45 minutes before the start.
2. Check room set up and equipment.
3. Post schedule of agenda using flip chart taped in the back of the room.
4. Make sure you have a CE Sign-In Sheet (see enclosed example on page 22).
5. Distribute workbooks and tent cards (label and assign seating if you have a pre-registration list).
6. Continental breakfast or refreshments, if appropriate.
7. Conduct the workshop (see slides with suggested scripts for specifics).
8. Remember to save the last fifteen minutes for behavior selection, CE, and evaluations.
9. Remind learners that they will receive correspondence from IHC in 5 weeks: a.) to complete a brief online survey about their experience using their newly learned communication skills with their patients and b) their CE certificate.
10. Make copies of the Learner Registration and Evaluation Forms (from workbook) and send **originals** to: Mary Barrett, CE Administrator, Institute for Healthcare Communication, 171 Orange Street, 2R, New Haven, CT 06510-3111

G. IHC CE/CME Policies and Faculty Disclosure

As an accredited CE/CME Provider, IHC subscribes to the ACCME Standards of Commercial Support (SCS). This ensures that IHC's educational materials do not contain any advertising, trade names or product group messages and that the educational content does not include discussion of therapeutic options or the endorsement or discussion of proprietary or commercial products. IHC complies with all ACCME Standards and requires compliance of these same standards from all IHC trained faculty in their planning and delivery of IHC workshops:

- **ACCME SCS 6.3** The source of all support from commercial interests must be disclosed to learners. When commercial support is 'in-kind' the nature of the support must be disclosed to learners. **(NOTE: This includes commercial support received for refreshments that are provided to workshop learners).**
- **ACCME SCS 4.3** Educational materials that are part of a CME activity, such as slides, abstracts and handouts, cannot contain any advertising, trade name or a product-group message. **(NOTE: This includes any advertising messaging used to promote the workshop within the organization and/or slides that are included as part of the workshop. IHC also requires that all materials used to advertise the IHC workshop contain the designated IHC Accreditation statements as listed on page 2 of this manual).**
- **ACCME SCS 4.1** Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities. **(NOTE: Any commercial exhibits and/or advertisements must be physically separated from the location of the IHC workshop).**
- **ACCME SCS 4.2** Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME. **(NOTE: No commercial product promotion will be allowed before, during or after the presentation of IHC workshops).**
- **ACCME SCS 5.1** The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest. **(NOTE: The development of content for all IHC workshops is solely based on evidence-based practices derived from the literature on clinician-patient communication to promote improvements in healthcare outcomes and is the exclusive domain of IHC CE/CME Planners comprised of content experts in clinician-patient communication. IHC does not allow any proprietary messages which promotes a commercial interest, nor does IHC allow content changes made to CE workshop slides without approval. (SCS 4.3)**
- **ACCME SCS 5.2** Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company. **(NOTE: IHC does not allow use of trade names or products associated with a commercial interest during IHC workshops).**

FACULTY DISCLOSURE REQUIREMENTS:

ALL IHC faculty must make a disclosure statement about any real or apparent financial affiliations. A disclosure statement **MUST** be made regardless of whether or not any financial affiliations exists. While you have already completed an application that included a faculty disclosure statement prior to attending the faculty training program, we also **REQUIRE** that you register your disclosure information in our online database and update it on a yearly basis or as needed.

As stated in ACCME Standards, any faculty member who refuses to disclose relevant financial relationships will be disqualified from being an IHC faculty member and will no longer be able to teach IHC's workshops. To further ensure compliance with ACCME Standards, we have included 2 items in workshop evaluation forms completed by all learners (see page 24, items 3 and 4) specific to whether the faculty made appropriate financial disclosure statements prior to the workshop and whether the workshop content contained commercial bias.

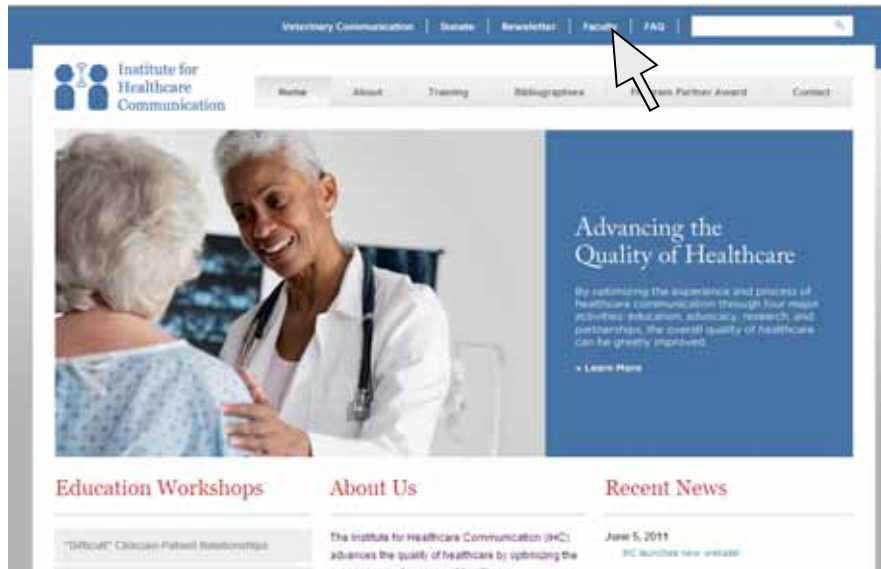
We have worked to make the disclosure process as simple for you as possible.

1. Go to the IHC website at <http://healthcarecomm.org>.
2. Click on **FACULTY WORKSHOP CENTER**.
3. Answer the questions (up to 3, depending on how they are answered).
4. Click to download your personalized PowerPoint slide and accompanying script that you can add to your workshop slide presentation. This slide **must** be shown by each faculty at the beginning of their presentation **OR** given as a handout to the workshop participants.

Faculty CME Disclosure

Go to <http://www.healthcarecomm.org>

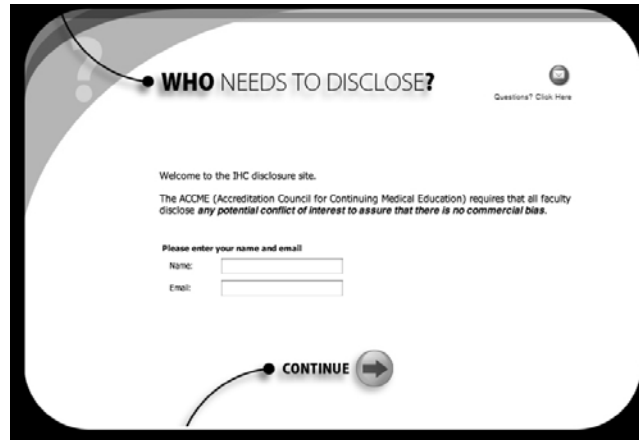
Click on Faculty



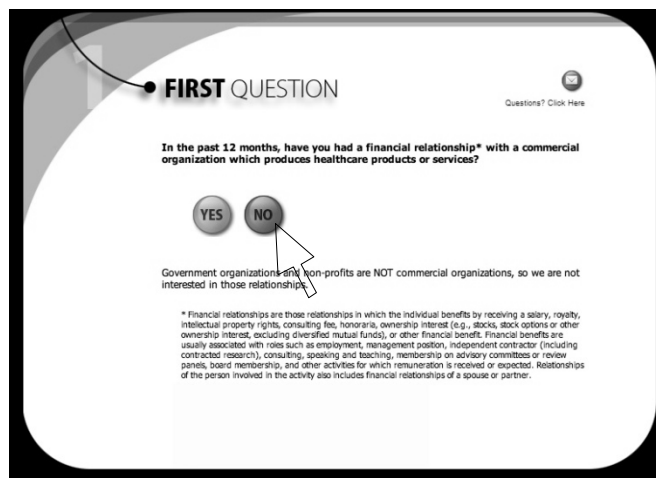
Click on Faculty CE/CME Disclosure



Enter your name (as you want it to appear on your slide) and e-mail address

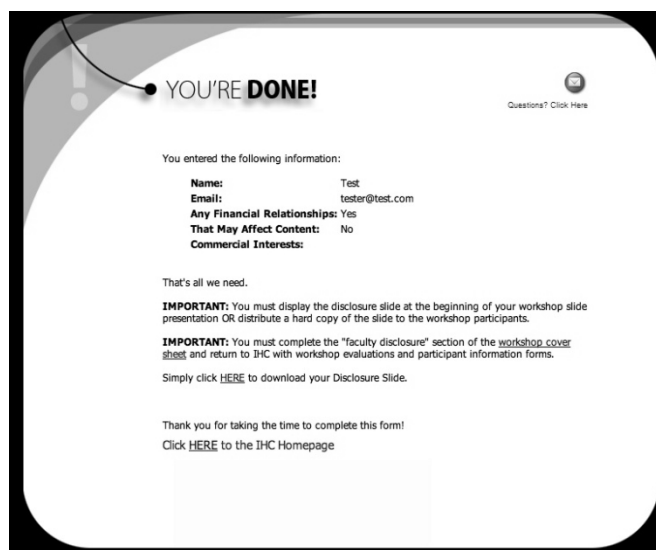


Indicate whether or not you have a financial relationship to disclose



<http://www.gotomylist.com/eSystems/ihcdisclosure/step1.cfm>

If you answered NO



Your PowerPoint slide will load. Select file, Save As, and save your disclosure slide to your hard drive.

As an IHC faculty member, Faculty Name has no relevant financial relationships to disclose.



If you answered YES to Question 1



Answer whether or not you will be discussing the products of the commercial organization

If you answered YES to Question 2



If you answered NO to Question 2

Enter the Commercial Interest and select the Nature of the Relationship from the list



You will be directed to this screen

Select File, Save As, and save your disclosure slide



Because there may be a financial conflict of interest, we need to resolve the conflict before you can download your disclosure slide. You will be contacted by the Institute staff.

Insert your personalized slide into your Workshop Slides File to ensure that disclosure is made to your workshop learners **prior to the beginning of the workshop.**

H. Continuing Education Credits and Faculty Responsibilities

IHC Accreditation Background

As discussed, IHC has maintained accreditation status to grant continuing education through two accrediting bodies: Accreditation Council of Continuing Medical Education (ACCME) and American Academy of Family Physicians (AAFP). IHC also maintains a co-providership with the University of Pittsburgh, School of Nursing, accredited by the American Nursing Credentialing Center (ANCC) to provide continuing nursing education (CNE). To award CME or CE credits for a given course, the accredited provider organization has to go through an accreditation process which is tightly controlled by each of the accrediting bodies such as the ACCME. As an accredited provider, IHC grants a prescribed number of CE credit hours for learners who attend the communication workshops.

CME/CE Workshop Cover Sheet

Faculty members must complete the CME/CE Workshop Cover Sheet (see page 21) and forward to IHC along with 1) CME/CE sign in sheet (if available), 2) Participant demographic data (Learner/Participant forms), and 3) Workshop Evaluation forms.

CME/CE Sign -In & Data Sheets

If a CME/CE sign-in sheet is used, it will need to be signed by all participants and returned along with the cover sheet, data forms for CME/CE credit and evaluations.

The participant demographic data forms (see page 23) must be returned to IHC **as soon as possible**. It may be important to clarify with your learning audience that the data provided is for the IHC data base and is not provided to any one in marketing and/or sales with any corporate sponsor. Thus, no individual clinician or individual organization need be concerned that the data provided on these colored forms will be used for any of the marketing or sales efforts of pharmaceutical representatives. We have had no resistance from people to completing this form.

Workshop Evaluation

Completed workshop evaluations must be collected in order to receive CE/CME credit. This requires only a few minutes for the learners to complete at the conclusion of the workshop. We have not encountered any learner resistance in completing them as these serve as standard practice in all CME activities. The evaluation data provides IHC with the ability to monitor learner feedback on course content, achieving learning objectives and faculty facilitation. We closely monitor workshop evaluations. Typically, the majority of overall ratings of workshops are within the good to excellent range (Likert scale 1-5). Overall ratings tend to improve as faculty members become more familiar with the material and experienced workshop facilitators. IHC will routinely send you a summary of your workshop evaluations.

CME/CE Certificates

The CME/CE certificates (see sample on page 25) will be emailed directly to learners within five weeks after the IHC staff receives them. If the learner does not provide their email address, the certificate will be mailed through standard U.S. mail. However, email is the preferred route.

Post Workshop Electronic Survey

As part of our goal in measuring the effectiveness of our educational programs, IHC sends an online post workshop survey to all IHC workshop learners. The goal of this confidential survey is to assess the impact of the training on their interactions with patients. The link to the online survey is sent to them along with the CE certificate 5 weeks after attending the workshop. We also send them the form they completed at the conclusion of the workshop which lists the two communication techniques they've committed to trying in practice. The learner's experience using the two techniques serves as the basis for the survey. A sample post-workshop survey from our CPC workshop is found on page 18. The data

collected from the surveys provide IHC with important information useful for program planning, evaluation and for CME content and format revision and/or updates.

Sample CPC Post-Workshop Survey

IHC – Institute for Healthcare Communication
Clinician-Patient Communication

Step 1 – Please complete the following:

Institute for Healthcare Communication – Clinician-Patient Communication Evaluation

1. Since attending the IHC workshop, I have used “Technique 1” listed in attached form...
 - Always
 - Often
 - Sometimes
 - Not at all
2. Since attending the IHC workshop, I have used “Technique 2” listed in attached form...
 - Always
 - Often
 - Sometimes
 - Not at all
3. Please check the following impacts you believe resulted from your participation in the workshop and from your use of these techniques in practice (check all that apply):
 - I have increased the percentage of time I’ve spent listening to my patients
 - I feel more satisfied with my patient interactions
 - My patients are more satisfied with our interactions
 - I am making more accurate diagnoses
 - I am more actively engaging my patients in decision-making
 - My patients have a better understanding of their health conditions
 - My patients are more likely to follow through on treatment recommendations
 - My patients are better able to manage their health conditions
 - None of the above
4. If other impacts, not listed above, resulted from participation in the workshop, please describe:
5. Tell us what we should include in future CE workshops to improve your confidence and competence communicating with patients, and/or staff and colleagues (check all that apply):
 - Research evidence and knowledge, Specify topics e.g., patient safety, diabetes self- management, etc.
 - Communication tools and skills, Specify, e.g., skills to improve patient adherence, tools to improve patient safety, giving bad news, empathy, etc.
 - Communication practice opportunities, Specify, e.g., simulated patient interviews, hands-on team communication tools, etc.
 - Other

6. For all areas selected above, please specify your suggestions here:

7. Please select your profession(s)

- Administrator
- Clinical Researcher
- Educator
- Lawyer/Attorney (JD)
- Nurse
- Nurse Practitioner (NP)
- Physical Therapist (PT)
- Physician (MD or DO)
- Physician Assistant/Associate (PA)
- Psychiatrist
- Psychologist (PhD, PsyD)
- Risk Manager
- Social Worker (MSW, ACSW, CSW, BSW)
- Technician

8. If your profession was not listed above, please list it here:

Procedures for Continuing Education

(CME) AND CONTINUING EDUCATION (CE) CREDIT

Clinicians who participate and complete IHC workshops are eligible to receive category 1 CME credit and/or prescribed credit for American Academy of Family Physicians. As stated, IHC is an accredited provider with ACCME and AAFP and will issue the CME/CE certificates directly to learners electronically. In addition, select IHC workshops are eligible for continuing nursing education through IHC's co-provider relationship with University of Pittsburgh, an accredited provider of the American Nursing Credentialing Center (ANCC).

In order to receive CME/CE or prescribed credit, learners must:

1. Complete the entire workshop
2. Enter their name and signature on the sign-in sheet
3. Provide their name and emailing address on the individual registration form provided during the workshop (participant information form)
4. Complete an anonymous evaluation form (workshop assessment)

According to the CE/CME guidelines of the Accreditation Council for Continuing Education, our accreditation does not allow joint sponsorship by non-accredited organizations. Therefore, it is essential that the CE/CME credit for this workshop be provided directly by IHC. Please consult our office at (800) 800-5907 if you have any questions or concerns about CE credit. In order to provide CME/CE credit, we must receive the names (legibly hand printed) and signatures of the participants. This is provided through the required participant information form. However, if possible, the host institution may also prepare in advance a sign-in sheet with the typed (or legibly hand printed) names for all clinicians attending the workshop. Place a blank signature line next to each name, and also indicate the date, time, location and presenter of the workshop session at the top of the sign-in sheet (see sample on page 22).

If a sign-in sheet is used, please be sure to retain a photocopy for your records before forwarding the original to IHC. Send the original along with the completed data and evaluation forms to: Ms. Mary Barrett, CE Administrator, Institute for Healthcare Communication, 171 Orange Street, 2R, New Haven, CT 06510-3111. We will provide you with a summary of the evaluation by email within five weeks. In addition, CE/CME certificates will be emailed directly to the learners within five weeks. Please note that the CE certificates for nursing will include the credentials of our University of Pittsburgh, School of Nursing as IHC's co-provider.

If you wish for the CE/CME certificates to be emailed or delivered to you, please make a note of this on your cover sheet when you mail the evaluations to us.

Sample Participant Form



IHC Workshop Participant Information

Please complete the following form so we can send you your Continuing Education certificate of attendance and additional educational materials.

Please **PRINT CAREFULLY.**

WORKSHOP INFORMATION	
Workshop Date _____ / _____ / _____	Location _____
Name of Presenter(s) _____	
PERSONAL INFORMATION	
Last Name _____	First Name _____
Title of your position in your organization _____	
Your Specialty _____	
Name of your organization _____	
ADDRESS WHERE YOU WOULD PREFER TO RECEIVE MAIL:	
Street _____	
City _____	State _____ Zip Code _____
Email address: _____	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
DEGREE (PLEASE CHECK <input type="checkbox"/> OR COMPLETE)	
<input type="checkbox"/> MD	<input type="checkbox"/> DO
<input type="checkbox"/> MSW	<input type="checkbox"/> RN
<input type="checkbox"/> RPh	<input type="checkbox"/> PA
<input type="checkbox"/> PharmD	<input type="checkbox"/> DDS
<input type="checkbox"/> PhD	<input type="checkbox"/> Other _____
<input type="checkbox"/> EdD	
TYPE OF CONTINUING EDUCATION CREDIT	
<input type="checkbox"/> AAFP Prescribed Credit	<input type="checkbox"/> ACCME Category 1 CME
<input type="checkbox"/> ANCC Nursing CE	
PLEASE CHECK # OF CLAIMED CREDIT HOURS <input type="checkbox"/> 4.25 <input type="checkbox"/> 6.0 <input type="checkbox"/> Other _____	
USING THE INFORMATION FROM THE TECHNIQUES SECTION OF THE WORKBOOK, WHAT <u>TWO</u> TECHNIQUES DO YOU PLAN TO INCORPORATE INTO YOUR PRACTICE DURING THE NEXT FIVE WEEKS?	
One _____	

Two _____	

SIGNATURE _____

Sample Evaluation Form



Institute for Healthcare Communication Workshop Assessment

Workshop date _____ / _____ / _____ Location _____

Name of Presenter(s) _____

Please help us to increase the effectiveness of the workshop by responding to the following items. Please place a check mark in the space that best describes your assessment.

THE PRESENTER					
		EXCELLENT	GOOD	FAIR	POOR
1	The presenter's comfort and confidence of the subject matter.				
2	The presenter's human relations skills: listening, interest in the opinion of others, etc.				
3	The presenter(s) provided appropriate financial disclosure statements	YES <input type="checkbox"/>		NO <input type="checkbox"/>	
4	Materials in this workshop were free of commercial advertising, trade names or product group messages.	YES <input type="checkbox"/>		NO <input type="checkbox"/>	
THE FACILITY					
		EXCELLENT	GOOD	FAIR	POOR
5	The training facility.				
WORKSHOP COMPONENTS					
		EXCELLENT	GOOD	FAIR	POOR
6	Presentation: Research Overview and Premises				
7	Exercise: Frustrations				
8	Presentation: E1 Engagement and E2 Empathy				
9	Exercise: Video Case study 1 (Dialogue- Do differently)				
10	Presentation: E 3 Educate				
11	Exercise: Practice ASK-TELL-ASK				
12	Presentation: E4 Enlist				
13	Exercise: Video Case study 2 (Monologue - Respond)				
14	Exercise: Consultation and Frustration Review				
WORKSHOP OBJECTIVES					
		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
15	As a result of this workshop I <ul style="list-style-type: none"> Have increased my awareness of the biomedical and communication procedures required in healthcare practice 				
16	As a result of this workshop I <ul style="list-style-type: none"> Have identified key communication skills that are essential to my role in healthcare practice 				
17	As a result of this workshop I <ul style="list-style-type: none"> Have been provided with opportunities to practice key communication skills 				
18	As a result of this workshop I <ul style="list-style-type: none"> Have committed to applying 2 learned skills in my patient interactions 				
OVERALL					
		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
19	Overall, this workshop was effective.				
20	I will recommend this workshop to colleagues.				

COMMENTS

(Use reverse side if necessary)

Sample Certificate



Certificate of Attendance

The Institute for Healthcare Communication certifies that

Carmen Acevedo, MD

has participated in the educational activity titled

Clinician-Patient Communication to Enhance Health Outcomes

at

Peoria, Illinois

on

May 22, 2012

and is awarded **4.0 AMA PRA Category 1 Credit(s)TM**

ACCME:

The Institute for Healthcare Communication is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. The Institute for Healthcare Communication takes responsibility for the content, quality, and scientific integrity of this CME activity. ACCME Provider #0004248

AAFP Credit:

This activity has been reviewed and is acceptable for up to 4.0 Prescribed credit(s) by the American Academy of Family Physicians. AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 CreditTM toward the AMA Physician's Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed credit, not as Category 1.

Kathleen A. Bonvicini, EdD, MPH
Chief Executive Officer

Sample Evaluation Summary Report

June 29, 20012
Page 1 of 2

WORKSHOP EVALUATION SUMMARY REPORT



Organization: **Wallace Medical Group**

Location: **Tremont, PA**

Workshop Date: **05/31/2012**

Number of Participants: **8**

Activity: **CPC**

Number of Evaluations Completed: **8**

Instructors: **Fowler, Roberta**

	Mean	Standard Deviation	Excellent or Strongly Agree	Good or Agree	Fair or Disagree	Poor or Strongly Disagree	N/A
1. The presenter's mastery of the subject matter	4.00	0.00	8	0	0	0	0
2. The presenter's human relations skills: listening, interest in the opinion of others, etc.	3.88	0.33	7	1	0	0	0
3. The presenter(s) provided financial disclosure statement(s)	4.00	0.00	8	0	0	0	0
4. The training facility	3.88	0.33	7	1	0	0	0
5. Lecture: Introductions and Premises	3.88	0.33	7	1	0	0	0
6. Exercise: Motivation	3.75	0.43	6	2	0	0	0
7. Lecture: The Clinicians	3.88	0.33	7	1	0	0	0
8. Exercise: Clinician Assessment	3.86	1.50	6	1	0	0	1
9. Exercise: Clinician Conviction & Confidence with Challenging Patient	3.88	0.33	7	1	0	0	0
10. Lecture: Intervention	3.75	0.43	6	2	0	0	0
11. Exercise: Assessing Patients	3.88	0.33	7	1	0	0	0
12. Exercise: Increasing Choices to Promote Change	3.88	0.33	7	1	0	0	0
13. As a result of this workshop I feel able to reflect on role of clinician as facilitator of change	3.75	0.43	6	2	0	0	0

WORKSHOP EVALUATION SUMMARY REPORT



Organization: **Wallace Medical Group**
 Workshop Date: **05/31/2012**
 Activity: **C&C**

Location: **Tremont, PA**
 Number of Participants: **8**
 Number of Evaluations Completed: **8**

I Instructors: **Fowler, Roberta**

	Mean	Standard Deviation	Excellent or Strongly Agree	Good or Agree	Fair or Disagree	Poor or Strongly Disagree	N/A
14. I feel able to identify two strategies to assess an individual's motivation to change	3.75	0.43	6	2	0	0	0
15. I feel able to describe two skills to influence pt. behavior change, which apply to situations in clinical setting	3.63	.018	5	3	0	0	0
16. I feel able to demonstrate two techniques to use in clinical settings to influence change	3.75	0.43	6	2	0	0	0
17. Overall this workshop was effective	3.88	0.33	7	1	0	0	0
18. I will recommend this workshop to colleagues	3.88	0.33	7	1	0	0	0
TOTALS	3.84		120	23	0	0	1

WORKSHOP EVALUATION SUMMARY REPORT



Organization: **Wallace Medical Group**
 Workshop Date: **05/31/2012**
 Activity: **C&C**

Location: **Tremont, PA**
 Number of Participants: **8**
 Number of Evaluations Completed: **8**

I Instructors: **Fowler, Roberta**

Thank you!

I loved the motivation and reassuring techniques of our facilitators.

Excellent workshop. I had a great time. Thank you!

Very helpful and very applicable. Not just for practice but other aspects of life as well.

I. Use of IHC materials in non-workshop contexts

All use of any copyrighted IHC material must be reported to IHC. Please use the form on page 29 to notify IHC of any uses outside of the standard workshop format. This will allow us to collect more accurate data about the range of impact and reach of our educational activities.

Medical Schools and Residency Programs

IHC educational concepts, design, and materials are increasingly used in medical schools and residency programs throughout the U.S. and Canada. IHC recognizes that academic institutions already teach communication skills, although gaps in faculty training and educational materials present major barriers. To that end, IHC permits its trained faculty who have participated in IHC's Academic Faculty Course, to use IHC materials to enhance their educational programs. For some settings, the workshops may serve as the backbone of the curriculum; for others, the materials will enhance or extend the curriculum. IHC has worked with the ACGME, ABMS, ABIM, and other professional organizations to help health care organizations respond to requirements and standards for teaching and assessing communication skills competency and training.

Medical schools and residency programs can also establish a signed license agreement with IHC. This allows the Licensee to reproduce the workbook materials for physicians and other clinicians in training. In return, IHC requires an annual report on how the materials are used, estimated number and target audience demographics, and how their impact is evaluated. See page 32 for a copy of the licensing application.

Grand Rounds and other presentations

As an IHC faculty member, you may be asked to deliver short presentations related to the importance of communication in healthcare and essential techniques and skills. You may use IHC materials in these presentations as long as IHC's role in planning, developing and producing the materials is acknowledged. You may not offer CE/CME for these presentations.

Presentations at National or Regional Professional Meetings

As an IHC faculty member, you may want to present a workshop at a national or regional professional meeting. You may use IHC materials in these presentations as long as IHC's role in developing and producing the materials is acknowledged. In these situations, the sponsoring group may offer CME/CE. However, IHC will need to receive demographic and evaluation materials.

IHC non-CME/CE workshop materials usage form

Please complete the following information regarding IHC teaching materials and submit this form with learner demographics and sign-in sheets (if available). Thank you.

1. Faculty (i.e., your name and other presenters): _____
2. Date (i.e. date materials used): _____
3. Location: _____
4. Number of learners _____
5. Length of teaching session:
 1 hour 2 hours 3 hours
 4 hours 6 hours 8 hours
 Other (please specify): _____
6. I used materials from the following IHC workshops (please check all that apply):
 - Clinician-Patient Communication to Enhance Health Outcomes
 - "Difficult" Clinician-Patient Relationships
 - Choices and Changes: Clinician Influence and Patient Action
 - Beyond Informed Consent
 - Communication: A Risk Management Tool
 - Strangers in Crisis
 - Care not Cure
 - Conversations at the End of Life
 - Disclosing Medical Errors
 - Connected
 - Other (please specify:) _____
7. Audience (check all that apply):
 - Physicians (specify specialty: family med., surgery, etc.) _____
 - Nurses _____
 - Nurse Practitioners _____
 - Physician Assistants _____
 - Pharmacists _____
 - Psychologists _____
 - Social Workers _____
 - Residents (specify type) _____
 - Students (specify type) _____
 - Others (please specify) _____

8. Type of educational activity:

- Grand Rounds _____
- Resident seminar _____
- Student seminar (specify type of student): _____
- Conference (specify conference): _____
- Other (please specify): _____

9. Sponsoring Organization: (e.g., name of medical school, residency program, hospital, professional organization, etc.)

10. Please identify which teaching materials you used from the above workshops:

- Videotapes/DVD
- Slides
- Workbook

11. Was any type of CME/CE given by someone other than IHC?

- Yes (please specify who, type, and how many hours) _____

- No
- Unsure

Please provide any other information you think is important about how you used Institute materials:

Please mail or fax this form and participant sign-in sheet to:
Mary Barrett, CE Administrator
Institute for Healthcare Communication
171 Orange Street, 2R
New Haven, CT 06510-3111
Tel: (800) 800-5907
Fax (203) 772-1066

**INSTITUTE FOR HEALTHCARE COMMUNICATION, INC.
SAMPLE LICENSE TO USE AND REPRODUCE
PROGRAM MATERIALS**

(Contact IHC for Current License to Reproduce)

PARTIES:

Institute for Healthcare Communication, Inc.
171 Orange Street, 2R
New Haven, Connecticut 06510-3111

(the “*Institute*”)

(“*Licensee*”)

This agreement (“*Agreement*”) is entered into effective _____ by and between the Institute and _____ Licensee. The parties agree as follows:

1. BACKGROUND

The mission of the Institute is to advance the quality of healthcare by optimizing the experience and process of healthcare communication. This is accomplished by creating and disseminating innovative educational programs and services; advocating for the importance of communication as an essential aspect of healthcare; engaging in collaborative research on communication in healthcare; and partnering with other leading organizations that share its vision. The Institute has developed a series of educational programs to further its mission. The Institute is willing to permit certain medical schools and residency programs to present these educational programs through their qualified employees or designees, subject to certain requirements. Licensee desires to conduct certain of the Institute’s educational programs, and the Institute desires to grant Licensee the right to conduct such programs, in accordance with the provisions set forth in this Agreement.

2. PROGRAMS AND SUPPLY OF MATERIALS

A. The Institute shall provide to Licensee certain materials (the “*Materials*”) related to each educational program developed by the Institute that is checked below (each, a “*Program*”):

- Beyond Informed Consent
- Care not Cure
- Choices and Changes: Clinician Influence and Patient Action
- Clinician-Patient Communication to Enhance Health Outcomes
- Communication: A Risk Management Tool
- Connected
- Conversations at the End of Life
- “Difficult” Clinician-Patient Relationships
- Disclosing Medical Errors
- Strangers in Crisis
- Other (please specify): _____

The Materials will include an electronic copy (by disk or email) of the Program workbook (the “*Workbook*”) and also may include, as applicable for each Program, a manual for the Trainer (defined in Section 4.C), print copies of the Workbook, slides, tapes, DVDs, and/or text books. The Trainer will receive a physical copy of the Materials during the Faculty Development Course (defined in Section 4), and the Institute will provide the electronic copy of the Workbook to Licensee upon Licensee’s payment of the licensee fee pursuant to Section 5.A.

- B. During the term of this Agreement, the Institute will provide Licensee with updates, if any, to any of the Materials. Any such updates shall be part of the Materials for purposes of this Agreement.

3. LICENSE AND DISTRIBUTION OF PROGRAMS

Subject to the terms of this Agreement, the Institute grants Licensee a limited, non-exclusive, non-transferable right during the term of this Agreement, to the extent necessary to successfully implement the Program(s), to: (A) use the Materials solely to conduct the Program(s); (B) print, copy, or otherwise reproduce and distribute the Workbooks; and (C) modify the Program and any corresponding Materials, as well as print, copy, or otherwise reproduce and distribute the modified Materials, only to the extent required by Licensee’s educational needs to conduct the Program(s) and subject to Section 4.D.

4. OWNERSHIP AND RESTRICTIONS ON USE

- A. Institute owns all rights, including copyright, in the Programs and the Materials. Licensee may only use the Materials for the limited purposes set forth in this Agreement and may not otherwise sell, transfer, distribute, publish, reproduce, copy, or modify the Materials, in whole or in part, without the Institute’s prior written permission. With the exception of the Workbooks, none of the Materials may be printed, copied, or otherwise reproduced by Licensee, but they are available for purchase through the Institute.
- B. All Materials and reproductions of the Workbooks must contain the copyright notice and any other intellectual property or proprietary rights legends as they appear in such Materials as provided by the Institute to Licensee.
- C. Prior to conducting a Program, the faculty member in charge of conducting the Program on behalf of Licensee (the “*Trainer*”) must have completed the Institute’s training workshop to learn how to conduct, and use the Materials for, such Program (the “*Faculty Development Course*”). If Licensee at any time during the term of this Agreement wishes to replace the Trainer or have any other person become a Trainer for any Program, Licensee must notify the Institute and require any such potential new Trainer to complete the applicable Faculty Development Course prior to conducting any Program.
- D. If Licensee modifies any of the Materials, Licensee will include information regarding such modifications on the form attached to this Agreement as Appendix A (the “*Course Form*”), together with a copy of any such modifications, and submit them to the Institute within thirty (30) days following the completion of the Program or course using the modified Materials.

5. LICENSE FEE

For the right during the applicable term of this Agreement to use the Materials and make up to 500 copies or other reproductions of the Workbooks as provided in this Agreement, Licensee will pay the Institute: (A) \$3,000 upon execution of this Agreement for the initial term; and (B) within thirty (30) days of the date of the Institute’s invoice for any renewal term, \$3,000, unless the parties agree to modify the fee and/or number of permitted Workbook copies.

6. PROGRAM PARTICIPANTS

Physicians and students enrolled in a residency training program and/or accredited medical school program sponsored and conducted by Licensee, are eligible to participate in the Program(s) offered by Licensee (“*Participants*”). No other physician, student, or professional group is eligible to participate in the Program(s) offered by Licensee.

7. CONTINUING MEDICAL EDUCATION

The Institute will not provide, and Licensee may not provide, continuing medical education or other continuing education (“*CME*” or “*CE*”) credits to any Participant for their completion of or attendance at any of the Programs.

8. REPORTING; EXAMINATION

- A. Within thirty (30) days following completion of each Program or the course in which the Materials (or modified Materials) were used, Licensee will provide the completed Course Form and the information requested in the Course Form, including the Participant demographics, sign-in sheets (if available), the results of any evaluations of Participants’ learning or performance of communication skills and, if applicable, a copy of any modifications made to the Materials. The Institute’s primary goal in obtaining this information is to learn how the Materials are most useful for learners at various levels of training.
- B. Upon reasonable notice and at reasonable times and at the Institute’s expense, the Institute may from time to time examine Licensee’s books and records to the extent they relate to the modification and/or presentation of any Program, and may observe Licensee’s presentation of the Programs and courses that incorporate any part of a Program, to confirm Licensee’s compliance with this Agreement. Any such examinations and observances shall be subject to reasonable confidentiality restrictions.

9. THE INSTITUTE ATTRIBUTION

Licensee will prominently utilize the Institute’s name in announcing and promoting the Programs or describing the courses that include any of the Materials, and subject to Sections 3.C and 4.D, will utilize the Materials as they have been delivered to Licensee by the Institute, to acknowledge throughout the healthcare community the Institute’s role in furthering the effectiveness of healthcare communication.

10. TERM OF AGREEMENT

The initial term of this Agreement shall be for a period of two (2) years from the date first shown above. This Agreement shall automatically renew for additional consecutive two (2) year period(s) until either party provides written notice of termination to the other in accordance with Section 11.

11. TERMINATION

Either party may terminate this Agreement at any time upon at least sixty (60) days prior written notice to the other. The Institute may terminate this Agreement at any time upon notice to Licensee if Licensee materially breaches this Agreement, or if, in the Institute’s sole opinion, Licensee fails to conduct any of the Programs to the Institute’s standards.

12. POST-TERMINATION

- A. Upon termination of this Agreement, Licensee: (i) shall promptly return or destroy, at the Institute's option, all Materials provided to it by the Institute and all copies of them or any portion of them; and (ii) shall not present any of the Programs, or use any of the Materials or any modifications of the Materials on its own behalf or on behalf of any third party, or refer to the Institute in connection with any Licensee program or course.
- B. If this Agreement is terminated by the Institute due to Licensee's breach or failure to meet the Institute's standards as provided in Section 11, or by Licensee for any reason, then the Institute shall have no obligation to refund any amount of the license fee(s) paid. If the Institute terminates this Agreement for any other reason and such termination is effective during the initial term or a renewal term, then the Institute will refund to Licensee a pro rata portion of the license fee for the then-current term, based upon the number of months remaining in such term.
- C. The following sections shall survive termination of this Agreement: 8.B, 12.B, 13, and 20.

13. LIMITATIONS OF WARRANTY AND LIABILITY; INDEMNIFICATION

- A. It is the Institute's good faith belief that the Programs and the Materials are appropriate for their intended audience, however, THE INSTITUTE MAKES NO REPRESENTATIONS OR WARRANTIES OF ANY KIND WITH RESPECT TO THE PROGRAMS OR MATERIALS, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. Subject to Section 13.B, the Institute disclaims all liability and shall not be accountable under any legal theory for any outcome resulting from any use by Licensee of the Programs and/or Materials.
- B. The Institute agrees to defend, indemnify, and hold Licensee harmless from any and all third-party claims that any of the Programs or Materials infringes or violates such third-party's intellectual property or other proprietary rights. This indemnity does not apply to any modifications of the Programs or Materials by anyone other than the Institute.
- C. Licensee agrees to defend, indemnify, and hold the Institute harmless from any and all third-party claims arising out of or relating to Licensee's exercising its rights under this Agreement. This indemnity does not apply to any claims to the extent the Institute is obligated to indemnify Licensee pursuant to Section 13.B.
- D. Except to the extent a party is required to fulfill its indemnification obligations for third-party claims, in no event shall either party be liable for punitive, indirect, incidental or consequential damages, whether based in contract, tort or any other legal theory and irrespective of whether such party has been advised of the possibility of any such damages.

14. AMENDMENT AND ENTIRE AGREEMENT

Any amendment to this Agreement shall be in writing signed by an authorized representative of each party. This Agreement constitutes the entire agreement of the parties relating to its subject matter, and supersedes any and all previous agreements between the parties with respect to such subject matter.

15. GOVERNING LAW

This Agreement shall be governed and interpreted, and all rights and obligations of the parties shall be determined, in accordance with the laws of the State of Connecticut, without regard to its conflicts of laws principles. Any dispute, controversy or claim arising out of or relating to this Agreement or its breach, termination or invalidity, shall be brought in the state or federal courts of Connecticut, and the parties submit to such jurisdiction and venue.

16. NOTICES

Any notice given pursuant to this Agreement shall be in writing and shall be delivered personally, sent by registered or certified mail, postage prepaid return receipt requested, or by commercial courier; or sent by telefax or e-mail, with a confirmation copy sent by one of the foregoing methods within one (1) business day, to the following addressees:

For the Institute: Institute for Healthcare Communication, Inc.
171 Orange Street, 2R
New Haven, CT 06510-3111
Attn: _____
Fax: (203) 772-1066
E-mail: _____

For Licensee: _____

Attn: _____
Fax: _____
E-mail: _____

or to such other address as the addressee may have specified in notice given to the other party as provided in this Section.

17. SEVERABILITY

If any provision of this Agreement is found in any jurisdiction to be in violation of public policy, illegal or unenforceable, such finding shall not invalidate any other provision of this Agreement in that jurisdiction, and this Agreement shall be deemed amended to the minimum extent required to comply with the law of such jurisdiction.

18. WAIVERS

The failure of any party to enforce at any time, or for any period of time, any provision of this Agreement shall not be construed as a waiver of such provision or of the right of such party thereafter to enforce each and every provision of this Agreement.

19. INTERPRETATION

All section headings in this Agreement are for convenience of reference only, they do not form a part of this Agreement and shall not affect in any way the meaning or interpretation of this Agreement. This Agreement will be construed without any presumption or other rule requiring construction against the party drafting the provision to be interpreted.

20. FURTHER ASSURANCES

Each party will take all actions reasonably necessary and requested by the other party to effect any of the provisions of, or any transaction contemplated by, this Agreement.

[The next page is the signature page]

Agreed to and accepted by:

**INSTITUTE FOR HEALTHCARE
COMMUNICATION, INC.**

LICENSEE: _____

Signature

Signature

Print Name

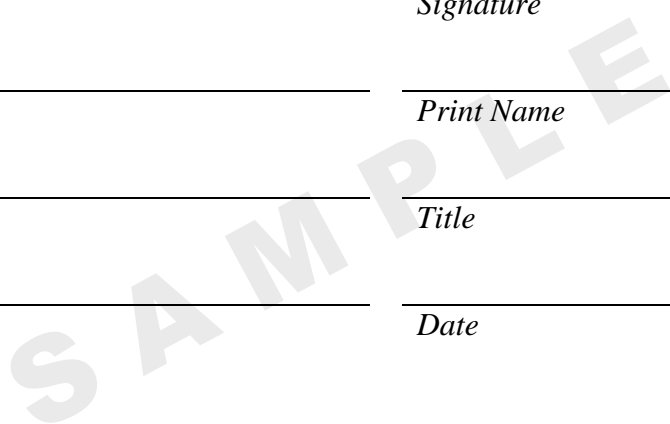
Print Name

Title

Title

Date

Date



APPENDIX A

Reporting Form for Use and/or Modification of Program(s) or Materials

Please complete the following information regarding the Materials and submit this form with the Participant demographics, sign-in sheets (if available), the results of any evaluations of Participants' learning or performance of communication skills and, if applicable, a copy of any modifications made to the Materials. Thank you.

- 1. Faculty (i.e., Trainer's name and other presenters): _____
- 2. Date (i.e. date Materials used): _____
- 3. Location: _____
- 4. Number of Participants: _____

6. Length of teaching session:
- 1 hour 2 hours 3 hours
 - 4 hours 6 hours 8 hours
 - Other (please specify): _____

12. I used Materials from the following Programs (please check all that apply):

- Beyond Informed Consent
- Care not Cure
- Choices and Changes: Clinician Influence and Patient Action
- Clinician-Patient Communication to Enhance Health Outcomes
- Communication: A Risk Management Tool
- Connected
- Conversations at the End of Life
- "Difficult" Clinician-Patient Relationships
- Disclosing Medical Errors
- Strangers in Crisis
- Other (please specify): _____

13. Audience (check all that apply and if applicable, specify specialty: family med., surgery, etc.):

- Physicians _____
- Nurses _____
- Nurse Practitioners _____
- Physician Assistants _____
- Pharmacists _____
- Psychologists _____
- Social Workers _____
- Residents (specify type) _____
- Students (specify type) _____
- Others (please specify) _____

14. Type of educational activity:

- Grand Rounds: _____
- Resident seminar _____
- Student seminar (specify type of student): _____
- Conference (specify conference): _____

Other (please specify): _____
15. Sponsoring Organization (name and address of medical school, residency program, hospital, professional organization, etc.):

16. Please identify which Materials you used from the above Programs:

- Videotapes/DVD
- Slides
- Workbook

17. Please indicate the nature of any modifications made to the Program(s) or Materials, and the reason(s) for the modifications:

18. Please provide the Institute with a copy of any modifications made to any of the Materials.

19. If the Program was conducted as a stand-alone program, please provide details regarding the use of the Materials and presentation of the Program (e.g., large or small groups of Participants, helpfulness of any modifications, faculty development, etc.):

20. If the Program was included as part of a course, please indicate:

-the portion of the curriculum pertaining to communications skills, including number and type of contact hours (lecture, small group, preceptor, attending, etc.): _____

- the ways the Materials were used and/or modified and Licensee's perceptions of the Materials' usefulness and educational quality: _____

21. Was any type of CME/CE given by someone other than the Institute?

- Yes (please specify who, type, and how many hours) _____
- No
- Unsure

16. Please provide any other information you think is important about how you used the Materials:

17. Please send this form, the Participant sign-in sheet, a copy of any modified Materials, the results of any evaluations of Participants' learning or performance of communication skills, and any other relevant information to:

Mary Barrett, CE Administrator
Institute for Healthcare Communication
171 Orange Street 2R
New Haven, CT 06510-3111
Tel: (800) 800-5907 Fax: (203) 772-1066
E-mail: MBarrett@HealthCareComm.org

J. Policies for Faculty Behavior

Language and Gender

Language conventions convey values. The policy of the Institute is to avoid any and all language that privileges one gender over another. Consequently, it shall be the practice of the Institute in all written and verbal communication to employ both feminine and masculine pronouns when singular references are called for. In addition, it shall be the practice of the Institute to alternate the order in which the pronouns are used. Example:

“A physician is encouraged to empathize with a patient and to extend her or his capacity to understand the situation of the patient.”

Similarly, it shall be the practice of the Institute to recognize that men and women are physicians, patients, nurses, P.A.'s, etc. Consequently, verbal and written communication will not privilege one gender over another because of a specific role: e.g. assuming that nurses are women.

Sexual Behavior

While the definition of sexual harassment has been well established in law as the creation of a workplace that establishes a hostile climate, and/or sexual comments, suggestions, actions, or gestures that are unwanted, the role of an Institute faculty demands special attention in three areas.

1. IHC faculty members are responsible for the climate that is created during and surrounding a workshop. It is the responsibility of IHC faculty members to **protect the rights of learners to be safe** from comments, suggestions, actions, or gestures that are inappropriate.
2. IHC faculty members are responsible for recognizing the power differential inherent in the role faculty workshop leader. Faculty members are **expected to maintain professional boundaries** between the faculty member and participants during and surrounding workshops.
3. IHC educational programs invite learners, especially during faculty development programs, to participate in small group sessions which encourage openness as a means of fostering interpersonal support to promote risk-taking and increased learning. Faculty members are expected to refrain from any kind of comments, suggestions, actions, or gestures during these programs that do not **respect and support the maintenance of personal and professional boundaries**.

Faculty members are expected to report any deviations from these policies to the appropriate IHC staff member, Regional Consultant or Course Manager. The Executive Director of IHC will assess the situation and has the authority to dismiss the individual who has broken the policy from continued participation as a member of IHC faculty.

K. Certification

It is required that all new faculty in the U.S. be observed conducting a workshop and certified by a designated representative of IHC. Typically the observer will be the Regional Consultant for your region of the United States. If scheduling cannot be arranged, the Regional Consultant will nominate someone to take his/her place as observer and certifier.

The purpose of the certification process is to maintain “quality control” in the delivery of IHC workshops by making certain that faculty members are delivering the CME workshops as intended. The certification session serves as an extension of the faculty development program. The certification process provides the newly trained faculty member with additional coaching that is facilitative and supportive to increase the confidence of the faculty member in their preparation and delivery of their first workshop. In addition to receiving coaching and feedback, IHC requests feedback from you about your experience during the coaching and certification process. A feedback form is provided (page 60) for you to complete. Your completion of this feedback form provides us with valuable data to evaluate and maximize the effectiveness of the certification/coaching process.

The certification visit must take place within 6 months of the faculty development course. In rare instances, an additional visit will be required to ensure workshop fidelity.

To help in your certification visit preparation, please see Assessment check list on page 39.

The most useful process is to plan ahead so the certifier can meet with you prior to your first workshop presentation in order to cover any gaps in knowledge or questions, or simply review the material. The certifier can also assist you as a co-facilitator of the workshop to demonstrate and reinforce specific teaching points that you would like to see repeated. Keep in mind that the majority of the workshop will need to be presented by you in order for the certifier to provide a thorough assessment. The format for feedback is identical to the format used consistently during your Faculty Development Course. See page 46 for a sample certification form.

Certification Preparation Checklist

- ___ Contact your Regional Consultant as soon as you have a date scheduled for your workshop
- ___ Review the slides and suggested scripts
- ___ Review the guidelines and faculty directives for facilitating the workshop exercises
- ___ Review the videos (dialogue and monologue) you plan to use
(familiarize yourself with the key teaching points)
- ___ Make a note of which clips you want to stop at for the Monologue exercise
(be sure to include an emphasis on practicing all 4 Es including education and enlistment)
- ___ Review the annotated bibliography in the workbook
- ___ Read key research articles, as needed for more in-depth background
- ___ Practice delivering the short slide presentations and facilitating the exercises out loud
- ___ Practice delivery the short presentations tying in common frustrations
- ___ Practice delivering the short presentations using personal examples that are BRIEF
- ___ Time yourself giving the short presentations (to assure timekeeping)

Workshop Presentation and Facilitation Skills*

Presentation and facilitation skills:

Teaching and facilitating IHC workshops requires a combination of competencies including knowledge and familiarity with the material and practice. Being an effective presenter and facilitator is a learned skill. Even with in-depth knowledge of the material, it is important to practice the delivery for maximum impact.

Faculty Attributes

- Speech – Speak naturally, using the same mannerisms as during a personal conversation.
- Vocabulary – Use terms the audience will understand.
- Enthusiasm – Demonstrate enthusiasm for the topic. Enthusiasm is infectious and will help to overcome obstacles to learning.
- Sincerity – Course content has serious implications for healthcare delivery and outcomes. That said, it is possible to be serious and still have fun.
- Knowledge and experience – Use your understanding of the subject matter and applied experience to guide your learners through the learning process.
- Credibility – As a clinician leader within your organization or healthcare community, sharing your personal commitment to communication training will lend credibility to the workshop experience.
- Attitude/self-confidence – A positive attitude about the importance of the subject matter and confidence in your ability to present the material will ensure an effective experience.
- Eye contact – Maintain eye contact with the audience, referring to your faculty slides and suggested scripts as necessary to ensure accuracy.
- Dress – Dress in a manner appropriate to your teaching role and establish an environment conducive to learning.
- Gestures/Mannerisms – Natural is better. Avoid behaviors that create a distraction to learning, such as putting your hands in your pockets and jingling your change.
- Movement – The best way to move around the class is to walk naturally, and keep the pace slow. Too much movement can become a distraction for learners.

Presentation Aids

Several aids are available to assist with the delivery of IHC Workshops. These include:

- IHC Workshop Slides – These require a computer and a projection device (LCD).
- IHC Workshop Videos – A selection of scenarios are provided for you to choose from depending on your audience needs (e.g., specialty, etc.) These are included on the DVD and may be embedded in the slides with prior preparation.
- White board or flipchart – These training aids provide you with the ability to jot down ideas and thoughts from learners during a planned exercise during the workshop and/or for emphasis during the workshop (and/or to post the workshop agenda).

* Adapted from TeamSTEPPS, Team Strategies & Tools to Enhance Performance & Patient Safety, Instructor Guide, Training Techniques

Managing Challenging Learning Situations

A number of situations may arise in the classroom that can derail or create difficulty during the workshop. It is important that you be prepared to address and/or manage these when they occur.

- Non-communicative group/individual:
 - Ask direct yet learner friendly question (What have been your experiences with [fill in the blank] e.g., in understanding the reasons for patients not adhering? etc.
 - Ask an open-ended question.
 - Call individuals by name
 - Restate or rephrase or reword questions to focus attention

- Controlling, persistent talker
 - Ask direct “yes/no” questions, thank the learner, and move back to your presentation
 - Offer to follow-up during the break or after the workshop
 - Interject with: “That’s an interesting point...let’s see what others in the group think about it.”

- You lose control of the presentation
 - Re-establish eye contact
 - Change your position
 - Redirect the group to the visual aids
 - Ask direct questions to the more disruptive learners
 - Change the tone or volume of your voice
 - Call a break

- The group gets off topic.
 - Redirect and restate your objective
 - Summarize
 - Ask “yes/no” questions, then ask for an explanation that relates to the topic or ask open ended questions.
 - Refer to your visual aids

- Side Conversations
 - Call learner(s) by name and ask an easy question
 - If you are in the habit of moving around the room, stand casually near the learners who are talking. This should not be made obvious to the group.

Adult Learning Principles

One of the keys to being an effective workshop teacher/facilitator is to tailor the presentation to the audience as much as possible. IHC workshops may include a mix of learners from different positions and educational backgrounds (e.g., nurses, physicians, risk managers, etc.). However, there is one constant in this mixture; all of the learners are adults. Educational research has shown that certain teaching techniques enhance training provided to adults. Adults learn best when they are involved in the learning process. As emphasized during your participation in IHC’s Faculty Development Program, the following characteristics are common to adult students.

- Adult learners are self-directed
- Adult’s orientation to learning tends to be task or problem–centered
- Adult learners are motivated by internal incentives
- Adults learn best in a climate that is relaxed, collaborative, and mutually respectful
- Adults learn best through experiential activities that have immediate application to life tasks

The CPR Approach (Pike 1994)

Training expert Bob Pike uses the acronym CPR to address the importance of **content** relevancy, learner **participation**, and **reinforcement** in classroom training. This approach meets the needs of the adult learner and ensures the transfer of training.

Content

- Link goals of IHC's workshop to your learners' frustrations, challenges, gaps or problems in practice. (This answers the question, "What's in it for me?")
- Use your own personal vignettes to exemplify teaching points
- Encourage learners to share relevant examples
- All vignettes and examples should be from events that actually happened
- Ask occasional open ended questions and/or ask learners for their reaction to particular information presented in slides, e.g., Interruptions, non-adherence, informed consent process, etc.

Participation

- Foster interaction through appropriate room layout (suggested horseshoe shape as shown on page 9)
- Encourage learners to share their personal experiences
- Engage learners in practical exercises
- Allow time for questions, discussions, group exercises and debriefing of the exercise.

Reinforcement

- Instruct learners to mark central concepts in their notes
- Reinforce key concepts, skills and tools at the end of each module
- Clarify the objectives of each exercise during facilitation – e.g., we're now going to review a video case study – and I'll ask you to pay close attention to specific examples where you observe where the clinician conveys empathy...or could have conveyed empathy....etc.
- Reinforce skills and principles depicted in the video case, exercises.

Facilitation Skills

Facilitation is a method of instruction that utilizes the principles of the adult learning model. Unlike didactic (lecture) instruction in which the teacher leads the discussion step-by-step and summarizes each topic, a facilitation approach promotes learning through a process of inquiry through open-ended questions that generate discussion relative to principles being taught in the course.

Facilitation Basics

- Encourage learner participation. The adult learning model is built around the concept of self-learning. One way to ensure that learners are involved in the learning process is to encourage participation in the discussions. e.g., *What are your thoughts? What are your experiences? Does this match your experience in practice? What might the patient be thinking in this example? What might the clinician be thinking? What frustrations have you experienced in your patient interactions? What questions do you have about this? In what ways do you make your patients feel welcome?, etc.*
- Adapt the level of facilitation to the learners. It is important to know your audience. Depending upon the workshop topic and the learners' experiences, it is possible to use varying degrees of facilitation during a training session, e.g., basic facilitation to elicit full audience wide participation "*With a show of hands, how many of you have experienced frustration related to patient non-adherence?"* vs more advanced facilitation to elicit more in-depth participation with

opportunity to reflect on their response and encourage additional participation from others, “*What specific tips have you found to be helpful in improving adherence with your patients?*”

- Ensure all elements of the workshop are covered. Keep in mind the objectives of the workshop; if the discussion goes off on a tangent, guide it back on track.
- Integrate instructional points as provided in faculty slide notes/scripts. Make sure the discussions stay focused on the subject. Use questions and statements to emphasize instructional points, e.g., “*We’ve seen a variety of ways and strategies to check for patient understanding.*”

Facilitation Techniques

A skilled teacher/facilitator encourages learner participation through:

- Non-verbal feedback – Body language provides instant feedback to the learner. Use it to your advantage; show the learner that you are receptive to his/her opinion/idea.
- Short interjections – Use short statements to affirm discussion points or guide the discussion toward a learning objective.
- Echoing – Restate the point to ensure other class members were able to hear.
- Reflecting – Restate or summarize back to the learner or class., e.g., “*So you’re not convinced that...*” “*Your experience in treating patients with diabetes has helped you to see the importance of taking the time to understand their frustrations...*”
- Expanding – Elicit and clarify the learners’ point, “*Can you say more about....*” “*Help me understand...*”

Asking Questions

Questions are one of the most important tools available to you as an IHC workshop facilitator. Used correctly, questions provide immediate feedback about training effectiveness, and are a means of assessing learners’ knowledge, and can be used to guide discussions. When used incorrectly, questions can stifle learner participation and the learning process.

Questioning techniques:

- Direct question – In this questioning technique, the facilitator may direct the question to a specific person. This action may create anxiety unless a supportive and trusting environment has been firmly established.
- General address question – When using this questioning technique, the facilitator will first state the question, pause, and then generally call upon the learners to answer the question. This technique is better than the direct question because it tends to create less anxiety and learners have time to formulate a response.
- Return question – Similar to the reflecting technique discussed in the previous section. Instead of answering a learner’s question, the facilitator returns the question to the audience to answer, “*I’m curious to hear how others respond to this....Let’s ask - How do you respond to a patient who [asks you a personal question] etc., ?*”
- What does the instructor do if there is no response to a question? The answer depends upon the level of facilitation being employed.
 - High-level facilitation – Use silence or pauses to elicit responses. It will normally take only a short period of time before the learners will feel obligated to speak.
 - Intermediate-level facilitation – Re-word the question to ensure understanding, prompt the learners with bits of information, and try to avoid answering the question.
 - Basic-level facilitation – Respond to question, and confirm that learners understand and agree and/or elicit reactions/response.

COMMON PROBLEM AREAS WHEN CONDUCTING FIRST WORKSHOP

- Talking too much
- Time management
- Talking to screen/slide
- Not speaking loud enough
- Reading slide instead of paraphrasing
- Lack of familiarity with layout and structure of workbook
- Neglecting to model the communication skills (e.g., open-ended questions, reflective listening statements, etc.)
- Neglecting to ask for comments or questions after each segment
- Lack of familiarity or practice with audio-visual equipment
- Making value comments to learners answers during exercises
- Lack of clarity in providing directions for exercises
- Lack of examples

Certification Forms

Institute for Healthcare Communication

Assessment of Workshop Leader Skills

Workshop Leader Being Assessed _____

IHC Staff Member/RC Performing Assessment _____

Workshop Being Conducted _____

Location of Workshop _____

Date of Workshop _____

Send copy of certification report to ##### _____

Certified: Yes No

Additional Steps (If appropriate)

1. _____

2. _____

3. _____

Comments:

The following skills are used in conducting workshops for the Institute for Healthcare Communication. We have chosen the extremes of novice and master because they speak to the stage of development of a skill rather than to an absolute value.

Conceptual Skills

1. The leader is able to explain the concepts presented in the workshop clearly.

Novice Master
 1 2 3 4 5 6 7 8 9 10

COMMENTS
#####

2. The leader is effective in using examples to explain workshop concepts.

Novice Master
 1 2 3 4 5 6 7 8 9 10

COMMENTS
#####

3. The leader is effective in presenting the research that supports the workshop.

Novice Master
 1 2 3 4 5 6 7 8 9 10

COMMENTS
#####

4. The leader tells stories or uses vignettes that are relevant to the audience.

Novice Master
 1 2 3 4 5 6 7 8 9 10

COMMENTS
#####

5. The leader tells stories or uses vignettes that entertain the audience. The leader communicates that s/he enjoys this material.

Novice Master
 1 2 3 4 5 6 7 8 9 10

COMMENTS

6. The leader tells stories or uses vignettes that elucidate the conceptual material.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

Presentation Skills

7. The leader speaks with sufficient volume so that every participant can hear without difficulty.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

8. The leader uses his/her voice dramatically to bring variety and emphasis to the presentation.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

9. The leader uses physical position effectively: movement around room, choice of places from which to speak.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

10. The leader uses gestures effectively to bring emphasis to points: hands, arms, head.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

Exercise Management Skills

11. The leader understands all elements of each exercise: how the exercise fits into the workshop, the purpose of the exercise, the steps that must be done to complete the exercise, the final product of the exercise, the problems that people may encounter doing the exercise, how to resolve those problems.

Novice
 1 2 3 4 5 6 7 8 9 10 Master

COMMENTS

12. The leader describes each exercise so that each participant can follow the instructions.

Novice
 1 2 3 4 5 6 7 8 9 10 Master

COMMENTS

13. The leader answers exercise related questions clearly.

Novice
 1 2 3 4 5 6 7 8 9 10 Master

COMMENTS

14. The leader is effective consulting to individuals and teams on issues relating to the exercises.

Novice
 1 2 3 4 5 6 7 8 9 10 Master

COMMENTS

Group Facilitation Skills

15. The faculty member facilitates discussion between participants at appropriate times.

Novice
 1 2 3 4 5 6 7 8 9 10 Master

COMMENTS

16. The leader communicates warmth to the group.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

17. The leader communicates a demand for work and a belief that the work is important.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

18. The leader communicates openness and availability (non-defensiveness) as s/he answers questions, makes presentations, and assigns tasks.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

19. The leader manages time non-defensively and inoffensively.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

20. The leader manages the variety of interpersonal styles in the group so that participants don't dominate, retreat, or distract.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

Organization Skills

21. The room is appropriate for the workshop: size, lighting, temperature, noise level. (Underline any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

22. The room set-up is appropriate for the workshop: tables, chairs, AV equipment. AV equipment is in good working order. (Underline any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

23. Appropriate materials are available when needed: workbooks, slides, videotapes. (Underline any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

24. The leader makes appropriate financial disclosures regarding possible conflicts of interest, including disclosures about commercial support received by the leader and the organization(s) hosting the workshop. (Underline any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

25. Leader runs AV and room equipment (VCR, lights, etc.) easily. (Note any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

26. Participants have received appropriate pre-conference information: introductory materials, time, place, tasks, etc. (Underline any problem areas)

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

27. Appropriate refreshments are available for breaks.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

28. Leader clearly instructs participants to complete CE/CME required forms, including commitment to applying two communication skills in practice.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

29. Leader emphasizes the importance of completing IHC's post workshop survey that will be sent electronically to all participants within five weeks to assess the impact of the communication skills in practice.

Novice

1 2 3 4 5 6 7 8 9 10

Master

COMMENTS

--

STRENGTHS AND RECOMMENDATIONS TO IMPROVE SKILLS

COACHING AND FEEDBACK FORMAT

Component of Workshop: ##### _____

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

COACHING AND FEEDBACK FORMAT

Component of Workshop: _____ #####

www.eby

What Worked Well—Even Better Yet

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

Faculty Feedback
INSTITUTE FOR HEALTHCARE COMMUNICATION
FACULTY FEEDBACK
ABOUT THE CERTIFICATION PROCESS

Workshop Faculty Name: _____

IHC Representative/Certifier Name: _____

Workshop title _____

Location of Workshop _____

Date of Workshop _____ / _____ /200 _____

Date (Month and Year) of Faculty Development Program: _____

In order for us to monitor and assess the effectiveness of the training and certification process, we invite you to provide us with feedback about the certification experience. Please complete the following assessment of your certification experience including your certifier/coach's effectiveness and helpfulness as you prepared, delivered and received feedback. Please return this form directly to Mary Barrett, IHC Administrator by email: mbarrett@healthcarecomm.org or fax 203-772-1066 or by mail to Institute for Healthcare Communication, 171 Orange Street, 2R, New Haven, CT 06510-3111

Preparation for the Workshop

1. Coach's efforts to connect with me to plan for the coaching/certification visit

Not at all Helpful Extremely Helpful

1 2 3 4 5 6 7 8 9 10

2 a) Did the coach meet with you prior to the workshop? ____ Yes ____ No

If Yes, go on to question 3

b) **If No to Q 2a**, what was the reason for not meeting prior to the workshop?

c) **If No to Q 2a**, did the coach help you to prepare by phone or via e-mail?

_____ Yes, by phone

_____ Yes, via e-mail

_____ No, neither phone nor e-mail

If you answered NO to both 2a and 2c, skip to “During Workshop” section, question 10

3. Coach’s effectiveness in helping me to review and prepare for presentation segments of the workshop.

Not at all Effective Extremely Effective

1 2 3 4 5 6 7 8 9 10

4. Coach’s effectiveness in helping me to review and prepare for workshop exercises.

Not at all Effective Extremely Effective

1 2 3 4 5 6 7 8 9 10

5. Coach’s effectiveness in helping me to review and prepare for transitions between workshop elements.

Not at all Effective Extremely Effective

1 2 3 4 5 6 7 8 9 10

6. Coach’s effectiveness in helping me to plan and prepare for room setup and logistics for the workshop.

Not at all Effective Extremely Effective

1 2 3 4 5 6 7 8 9 10

7. Coach’s effectiveness in helping me to identify and prepare for challenging elements of the workshop.

Not at all Effective Extremely Effective

1 2 3 4 5 6 7 8 9 10

8. Coach's effectiveness in helping me to identify and develop a plan for meeting my personal goals as a workshop leader.

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10

9. Coach's expression of empathy and support in response to my feelings and concerns regarding preparation for the workshop.

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10

Additional comments regarding coach's performance during preparation for workshop:

During the Workshop

10. Coach's clarity regarding roles that s/he would play during the workshop (e.g., help with small group facilitation, track and provide feedback on time, availability to address questions regarding content).

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10

11. Coach's performance of agreed upon roles during workshop.

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10

12. Coach's availability and assistance when challenges arose during the workshop (circle NA if not applicable)

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10 NA

13. Coach's assistance and input during workshop breaks

Not at all Effective

Extremely Effective

1 2 3 4 5 6 7 8 9 10

Additional comments regarding coach's performance during the workshop:

Post Workshop Feedback

14. Coach's availability to meet for post workshop feedback

Not at all Effective Extremely Effective
1 2 3 4 5 6 7 8 9 10

15. Coach's feedback regarding my strengths and elements of the workshop that went well.

Not at all Effective Extremely Effective
1 2 3 4 5 6 7 8 9 10

16. Coach's feedback regarding aspects of my performance where improvement is needed.

Not at all Effective Extremely Effective
1 2 3 4 5 6 7 8 9 10

17. Coach's assistance developing a plan for continued learning and improvement of presentation skills.

Not at all Effective Extremely Effective
1 2 3 4 5 6 7 8 9 10

18. Coach's expression of empathy and support in response to my feelings and concerns regarding my performance.

Not at all Effective Extremely Effective
1 2 3 4 5 6 7 8 9 10

Additional comments regarding coach's performance during the feedback session after the workshop:

Please use the form below to provide your coach with specific feedback about their performance.

Faculty Learner _____ Certifying Coach _____

I NOTICED YOU DID THE FOLLOWING THAT WORKED REALLY WELL

Empty box for positive feedback.

I ALSO NOTICED THE FOLLOWING—YOU MIGHT WANT TO CONSIDER TO MAKE IT EVEN BETTER YET

Empty box for areas for improvement.

L. Regions and Master Trainers

IHC provides educational programs throughout United States and Canada. To ensure that our services are accessible, we have divided the United States into regions managed by a Master Trainer. The task of the Regional Consultant is to provide hands-on consultation and support to faculty within their region. This includes certification and systems consultation within your organization where the focus is on improving communication with patients and the entire healthcare team.

The task of IHC support staff is to provide administrative support for the faculty such as ordering materials, processing CE, or questions about a specific program.

On the following page you will find contact information for all of the Master Trainers.

Contact Information



Staff and Master Trainers

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Send Parcels to: Michele M. Nanchoff PhD RPsych c/o Grobman Law Suite 314 638 - 11 Avenue, SW Calgary, AB T2R 0E2 Canada If you need to call or provide a phone no for this address, here it is. Please ask for Lorena Leyva. Phone: (403) 237-0669 (ext 114)					

