



**UNIVERSITY OF CALGARY**  
FACULTY OF VETERINARY MEDICINE

# CLINICAL COMMUNICATION TRAINING

A Branch of UCVM's Professional Skills Program



## CORE DOCUMENT

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## Clinical Communication in Veterinary Medicine

### Mission

“Developing learners’ communication skills to enhance the quality of care and outcomes for patients, clients, veterinarians, and practice teams.”

### Object

The Clinical Communication Program focuses primarily on evidence-based communication process skills with significant secondary emphasis (years 2 and 3) on content and perceptual skills and how these skills influence each other. The program provides an opportunity for learners to continue to develop small group process skills and self and peer assessment skills. Relationship-centered care and the development of relational competence in working with clients, patients, peers, colleagues, and mentors are emphasized throughout.

The specific communication skills that are at the core of the Clinical Communication Program are presented in an instrument known as the Calgary-Cambridge Guides (CCG). Observation, feedback, learning and assessment in the course are structured around the CCG.

### Goals

- To influence knowledge base, competence and performance in clinical communication.
- To provide an evidence-based communication process that demonstrates the use of communication with intention for the purpose of accuracy, efficiency and supportiveness.
- To facilitate experiential learning opportunities within a safe environment for the advancement of clinical communication skills.
- To teach the importance and aid in the development of, supportive and cooperative relationships in professional practice.

### Format –

<u>YEAR</u>	<u>LECTURES</u>		<u>LABS</u>		<u>CASES</u>	<u>SCs</u>	<u>LIVE ANIMALS</u>
<b>ONE</b>	5 sessions	9 hours	9 sessions	27 hours	27	25	0
<b>TWO</b>	3 sessions	4.5 hours	10 sessions	30 hours	27	32	3/10 labs
<b>THREE</b>	2 sessions	3 hours	6 sessions	18 hours	15	9	6/6 labs

### Key benefits

- Quality communication is the strongest independent predictor of compliance.
- Effective communication reduces practitioner error and patient risk.
- Satisfaction of both clients and clinician is increased and complaints decreased when communication skills are strong.

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## Key Challenges

- a) Coach development and continued training is key to program consistency.
- b) The program must evolve constantly in order to cover an array of veterinary contexts and address current/relevant issues through the development of new cases.
- c) Quality and realism of scenarios has a direct impact on learner buy-in.
- d) The COVID-19 pandemic created new challenges to the program by forcing the lab delivery to an online platform. While there are platforms available to make remote delivery possible, not seeing clients in person and not being able to integrate live animals into labs changes the experience.
- e) Clinical content is of limited importance, particularly in years 1 and 2. Coaches need to be encouraged to focus on communication skills and relationships not medical content.
- f) Simulated Client training in providing feedback is critical to program quality.
- g) Quality assurance in SC feedback, professionalism evaluations and OSCE scoring is important to ensure quality, standardization and fairness of the program.
- h) Administrative support for the program is tight making growth difficult.

## Outcomes

The student will:

- a) Identify personal attitudes, assumptions, and emotional reactions and discuss their role in facilitating or interfering with communication.
- b) Demonstrate understanding of relationship centered veterinary medicine.
- c) Demonstrate the ability to conduct a structured interview with a client based on the principles of the CCG.
- d) Apply these communication skills appropriately in a variety of day-to-day circumstances.
- e) Engage in the feedback process and apply suggestions for enhancing personal performance and self-assessment skills.

## Program Overview

The Clinical Communication Program consists of lectures and labs over the course of both the fall and winter semesters of years 1 through 3 of DVM training. Large group orientations will occur at the beginning of each year. Lectures held intermittently throughout the year are intended to reinforce and further develop the skills which are then practiced in smaller groups in clinical communication labs.

## Program Schedule

VETMED 307 – 1 <sup>ST</sup> YEAR UCVF		Semester 1
Lecture	Introduction to VetM 307	1.5 hours
Lecture	Intro to Clinical Communication	3.0 hours
Lecture	Clinical Communication – Lab Overview	1.5 hours
Lab	Simple scenarios 1-10 – round 1 (3 cases per group)	3.0 hours
Lecture	Clinical Communication continued	1.5 hours
Lab	Simple scenarios 1-10 – round 2 (3 cases per group)	3.0 hours
Lab	Simple scenarios 1-10 – round 3 (3 cases per group)	3.0 hours
Lecture	Clinical Communication continued	1.5 hours
Lab	Scenarios 11-20 – round 1 (3 cases per group)	3.0 hours
Lab	Scenarios 11-20 – round 2 (3 cases per group)	3.0 hours
		Semester 2
Lecture	Giving and Receiving Feedback	1.5 hours
Lecture	Managing Conflict	1.5 hours
Lab	Scenarios 11-20 – round 3 (3 cases per group)	3.0 hours
Lab	Scenarios 21-30 – round 1 (3 cases per group)	3.0 hours
Lab	Scenarios 21-30 – round 2 (3 cases per group)	3.0 hours
Lab	OSCE Preparation	3.0 hours
OSCE	Interactive in-person exam	3.0 hours

VETMED 407 – 2 <sup>ND</sup> YEAR UCVF		Semester 1
Lecture	Clinical Communication Skills Review	1.5 hours
Lecture	Course Introduction and SOAPS lecture	1.5 hours
Lab	Scenarios 1-6 – round 1 (3 cases per group)	3.0 hours
Lab	Scenarios 1-6 – round 2 (3 cases per group)	3.0 hours
Lecture	Euthanasia lecture & discussion	1.5 hours
Lab	Euthanasia scenarios 11-20 – round 1 (3 cases per group)	3.0 hours
Lab	Euthanasia scenarios 11-20 – round 2 (3 cases per group)	3.0 hours
Lab	Large Animal Focus – round 1 (3 cases per group)	3.0 hours
		Semester 2
Lab	Large Animal Focus – round 2 (3 cases per group)	3.0 hours
Lab	Small Animal Focus – round 1 (3 cases per group)	3.0 hours
Lab	Small Animal Focus – round 2 (3 cases per group)	3.0 hours
Lecture	OSCE Preparation	1.5 hours
OSCE	Interactive in-person exam	3.0 hours

VETMED 507 – 3 <sup>RD</sup> YEAR UCVM		Semester 2
Lecture	Clinical Communication Skills Review	1.5 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lab	3 Bovine cases, 3 Equine cases, 3 small animal cases	3.0 hours
Lecture	OSCE Preparation	1.5 hours
OSCE	Interactive in-person exam	3.0 hours

## Assessment

Marks in each year of the program are distributed between labs, assignments, a mid-term exam, and a year end Objective Structured Clinical Exam (OSCE). Grading is a combination of formative assessment (lab feedback, self-appraisal, reflective exercises) and summative assessment (mid-term and final exams).

Although marks are calculated and published in each year of the program there is an expectation that students will show growth in their understanding and demonstration of clinical communication skills from one year to the next.

- Assignments include:
  - Critical Appraisal of a recorded interview
  - Professional Dossier/Portfolio comprised of:
    - Personal mission/vision statement
    - An intellectual autobiography
    - CV with sample cover letters
    - Reference letters
    - Supporting evidence
  - Self-assessments and reflection in each year with *Making the Match: Skills Based Competencies*.
- The mid-term is comprised of staged recordings of interviews with corresponding communication checklists and short and long answer questions designed to test student recognition and comprehension of clinical communication skills.
- During the OSCE each student conducts 4-6 interviews with different Simulated Clients (live animals are incorporated in some interviews in 2<sup>nd</sup> and 3<sup>rd</sup> year). The students' demonstration of clinical communication skills, as outlined in the CCG, is assessed by a communication coach/rater in each interview room. OSCEs are 3-4 hours in length.



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## Clinical Communication Lectures

Clinical communication lectures are guided by the content of the textbooks: Adams, C. & Kurtz, S. (2017). *Skills for Communicating in Veterinary Medicine*. Parsipanny, New Jersey: Dewpoint Publishing and Kurtz, S, Silverman, J. & Draper, J. (2005). *Teaching and Learning Communication Skills in Medicine*. Abingdon, UK: Radcliffe Publishing.

In addition to the information in the texts, lectures are delivered on giving and receiving feedback, handling conflict and communication around euthanasia. Students receive an orientation to the communication lab process and have the opportunity to explore in-depth the process for conducting an interview with a veterinary client.

## Clinical Communication Labs

Following the instruction that takes place in lectures, students are given the opportunity to participate in 3 hour interactive communication labs to consolidate their learning and practice their skills. In the lab sessions learners work in separate interaction rooms in small groups of 5 or 6 students with a clinical communication coach. Coaches facilitate the students in taking turns conducting interviews with different Simulated Clients (SCs).

The cases used in labs cover an array of species (feline, canine, equine, bovine, elapine, leporine, etc.) a variety of technical skills (gathering history, physical exam, diagnostics, euthanasia, etc.) and a range of issues (ethics, animal welfare, socio-economic challenges, cultural communication and more). Cases are written primarily for one SC although there are cases with more than one SC to add complexity and richness to the scenario.

Each interaction room has a built in camera that broadcasts to a control room where a live feed can be viewed or the recording can be digitally stored. Students are provided with the recordings of their interviews on USBs. They can view them and, at certain times during the year, will be asked to use a recording to complete a critical self-appraisal assignment. This process facilitates self-reflection and personal/professional growth.

When not conducting the interview, students in the small groups observe from outside the room through a window while wearing headsets that broadcast audio from inside the room. They take notes and following the interview they return to the room. The coach then guides the students through a tutorial on the communication skills demonstrated during the interview and invites them to engage in providing feedback to the interviewing student. SCs are also given an opportunity to provide feedback from the client's perspective.

In addition to guiding the students through the interviews Coaches examine clinical, ethical, business and/or professional issues that arose from the cases and discussions. Comments are recorded by coaches on a complete feedback form from the CCG and students provide their peers with notes on a form known as the WWW / EBY (What Worked Well / Even Better Yet). SCs also provide feedback in each area of the CCG along with comments for learners about what worked and what could have been better.

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## Communication Lab Expectations by Year

- 1st year –
  - Demonstrate an understanding of clinical communication skills with a focus on initiating the session, building rapport, and gathering information.
  - Demonstrate the ability to implement evidence based clinical communication skills with a simulated client.
  - Discuss ways in which process, content and perceptual skills impact each other.
  - Demonstrate the ability to provide objective feedback to others and to receive and, when appropriate, integrate feedback received from peers and coaches.
  - Identify personal attitudes, assumptions and emotional reactions to a range of consultations and discuss the role of these attitudes, assumptions and emotions in facilitating or interfering with communication.
- 2nd year –
  - Demonstrate an understanding of clinical communication skills with a focus on empathy, gathering information, and the beginnings of explain and plan.
  - Apply clinical communication skills learned in year 1 with greater specificity and intentionality across different contexts.
  - Integrate communication skills with other clinical skills including physical exam.
  - Demonstrate proficiency with skills necessary for explain and plan such as negotiating next steps including diagnostics with a simulated client.
  - Demonstrate the ability to collect information on biomedical history and client perspective in order to formulate a relevant clinical history.
  - Show ability to engage in reflective practice and adjust course of action as necessary.
  - Understand factors contributing to client compliance in veterinary care and identify areas where client compliance can be improved.
- 3rd year –
  - Demonstrate the ability to structure an interview following all the steps of the CCG and using all the skills taught in years one and two.
  - To continue to develop clinical communication skills to a level of competency essential for practice.
  - To be able to integrate clinical communication skills with technical skills and knowledge across a range of situations and issues.
  - To continue to develop the communication competency necessary for dealing with more complex communication issues and challenges.
  - To continue to develop the skills and attitudes essential for reflective practice in veterinary medicine.

## Confidentiality

All cases used in lectures, labs, assignments and exams are based on real situations and are therefore confidential, just as they would be in a practice setting. Professional, ethical behaviour dictates that details of cases be discussed only with the members of one's own small group. For learning to be optimal, learners need to experience the case for themselves without advance knowledge, hints, or warnings. Developing trust and a safe learning environment dictates that whatever happens in each small group is held in confidence by the members of the group and is not shared with others.

## Simulated Clients (SCs)

Simulated Clients come from a variety of backgrounds. While some are trained actors it is not a necessary requirement. Our program utilizes professional actors, medical skills simulated patients, zoo keepers, breeders, teachers, and individuals from many other backgrounds. Recruitment is done by word of mouth and everyone is interviewed and invited to observe a lab before participating as an SC.

Onboarding involves an orientation to our lab principles and processes, review of an SC manual, interactive training on how to provide client voice and SC feedback, and case specific training for each role they are recruited to play. They complete a feedback form for each student they complete an interview with.

As a general rule SCs are invited to portray a maximum of one role for each year of the program. This ensures the students don't see the same person in multiple roles over the year.

## Coaches

Coaches can be veterinarians, veterinary technicians, PhD students or communication experts. Recruitment is by word of mouth through existing coaches. Some are members of the Faculty of Veterinary Medicine, others are contracted as sessional coaches and commit to coaching a set number of labs each year. Some PhD students and other interested parties volunteer their time to act as coaches.

When onboarding new coaches they are loaned the *Skills for Communicating in Veterinary Medicine* textbook, attend an interactive workshop, and are invited to observe labs (from outside the rooms first then to sit in with an experienced coach). Collaboration with peer coaches is ongoing and new resources/updated support materials are provided continually.

The following lab documents are provided to the coaches prior to each lab:

- Class photos
- Student small group assignments
- Lab schedule with case names
- Students' professionalism rating rubric (completed for each student after each lab)
- Coach case summaries
- Student case instructions
- Feedback examples



The following are examples of some resources made available to the coaches through a shared drive folder:

- Calgary Cambridge Guide (CCG)
- FRANK Communication Tips
- Communication Skills Examples & Definitions
- Domains of Communication in Veterinary Medicine
- Explanation and Planning Emphasized
- Historical Investigation Pyramids
- A variety of articles on teaching communication, providing feedback, coaching, etc.

The following are examples of tools used to keep the lab as interactive as possible:

- Check-in & check-out – gives people a chance to share how they are feeling before and after the lab and are useful to open/close the lab in an intentional way.
- Time Outs – If the student is struggling, is off track, or wants to stop for advice.
- Rewinds – Don't just discuss it, go back in and try it.
- Client Voice – Any time a coach feels themselves or the student assuming what the client is thinking or feeling it is time to pause and ask for client voice.
- Demonstrating suggestions – If when providing feedback to a peer, a student suggests an alternative approach, it is essential for their learning that they dive into a brief interaction with the SC to practice delivering the proposed approach.

### **UCVM clinical communications team**

- Program Co-Directors:

#### Cindy Adams MSW, PhD

As a Professor in the Department of Veterinary Clinical and Diagnostic Sciences, Dr. Adams teaches in all 3 years of the Clinical Communication Program/Professional Skills at UCVM. She works to improve communication practices in veterinary medicine and education.

Dr. Adams has developed evidence-based communication curricula and methods for teaching, learning and evaluating communication skills across North America, UK and Australia. Her co-authored book: Skills for Communicating in Veterinary Medicine was released in 2016 and has earned widespread recognition in veterinary medical practice and education around the globe.

#### Terri Schiller DVM, CCRT, Dip ACVS

Dr. Schiller joined UCVM in 2012 as a sessional instructor in small animal surgery. In 2014 she became a Senior Clinical Instructor in the Department of Veterinary Clinical and Diagnostic Sciences. From late 2015 to mid 2019 - she was the Associate Dean, Clinical Programs.

Dr. Schiller teaches through all four years in the UCVM DVM undergraduate program and is actively involved in small animal intern training. She received the CVM Teacher of the Year award in 2015.

- Program Advisors:

Mandy Dale: [mandy.dale@ucalgary.ca](mailto:mandy.dale@ucalgary.ca)

Cheryl Hutton: [cheryl.hutton@ucalgary.ca](mailto:cheryl.hutton@ucalgary.ca)

## Appendices

### a. COACH EVALUATION OF STUDENT PROFESSIONALISM



## VETM 307/407/507 PROFESSIONAL SKILLS LABS

### Evaluation of Professionalism

PLEASE PRINT CLEARLY

**Date:** \_\_\_\_\_ **Case:** \_\_\_\_\_ (or write N/A)

**Coach:** \_\_\_\_\_ **Student:** \_\_\_\_\_

#### RESPONSIBILITY

<ul style="list-style-type: none"> <li>Arrives on time or early</li> <li>Well-groomed with good personal hygiene</li> <li>Business casual attire with clean &amp; pressed lab coat</li> <li>Prepared for class by completing reading/research</li> <li>Remains focused/follows instructions</li> </ul>	(0) Poor	(Circle a rating between 0 – 10)	(10) Excellent
	0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10		

#### COMMUNICATION

<ul style="list-style-type: none"> <li>Speaks clearly and articulately</li> <li>Expresses emotions appropriately</li> <li>Makes eye contact</li> <li>Shares the floor with others and listens attentively</li> </ul>	(0) Poor	(Circle a rating between 0 – 10)	(10) Excellent
	0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10		

#### INTEGRITY

<ul style="list-style-type: none"> <li>Able to advocate for self / asks for help if needed</li> <li>Is accepting of feedback from coaches/peers</li> <li>Gives feedback constructively</li> <li>Is respectful of the process and takes the lab seriously</li> <li>Is honest/self-reflective and engaged in self-growth</li> </ul>	(0) Poor	(Circle a rating between 0 – 10)	(10) Excellent
	0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10		

#### RESPECT

<ul style="list-style-type: none"> <li>Is sensitive to the needs/feelings of others</li> <li>Is adaptive to various situations</li> <li>Actively participates in class</li> <li>Demonstrates a strong work ethic</li> <li>Is positive/encouraging of self/others</li> </ul>	(0) Poor	(Circle a rating between 0 – 10)	(10) Excellent
	0 — 1 — 2 — 3 — 4 — 5 — 6 — 7 — 8 — 9 — 10		

#### COMMENTS

Please provide some feedback to aid the student in their personal growth.

#### POINTS TO CONSIDER:

- What level of involvement did the student show in the lab?
- Is the student's competency in line with the expectations for their level in the UCVM program?
- Does the student demonstrate an evolution of professional identity?
- How did the student's interaction with others enhance or detract from the group dynamic?
- When providing feedback was the student specific, respectful, insightful?
- Was the student open to receiving feedback/engaged in a high degree of self-reflection?

YOU COULD ALSO REFERENCE THE FEEDBACK EXAMPLES DOCUMENT FOR IDEAS

For Office Use Only

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**b. SIMULATED CLIENT FEEDBACK FORM**
**i. 1<sup>st</sup> year form**
**Simulated Client Feedback Form – VetM 307**

 Place an 'x' or checkmark in the appropriate box beside each statement.  
 Remember to add examples and/or comments for the students to view later.

<i><b>How did the student do at Initiating the Session?</b></i>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt connected to the student veterinarian at the beginning of the interaction.</i>					
<i>I felt that the student veterinarian understood the reason for my visit.</i>					
<i>I felt respected by the student veterinarian.</i>					
<b>Comments / Examples:</b> _____ _____ _____					
<i><b>How did the student do at Gathering Information?</b></i>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that the student veterinarian encouraged me to tell my story.</i>					
<i>I felt that the student veterinarian listened attentively.</i>					
<i>I felt that the student veterinarian recognized the role this animal plays in my life.</i>					
<b>Comments / Examples:</b> _____ _____ _____					
<i><b>How did the student do at Providing Structure?</b></i>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that there was a logical flow to the interaction.</i>					
<i>I felt that the student kept our appointment on track.</i>					
<b>Comments / Examples:</b> _____ _____ _____					

<b>How did the student do at Building a Relationship?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that the student veterinarian was interested in my opinion.</i>					
<i>I felt that the student demonstrated appropriate confidence.</i>					
<i>I felt that the student veterinarian involved me throughout the entire appointment.</i>					
<i>I understood the information I received from the student veterinarian.</i>					
<i>I felt that the student veterinarian communicated that they cared about me as a person.</i>					
<b>Comments / Examples:</b> _____					
_____					
_____					
_____					

  

<b>How did the student do at Closing the Session?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt the student veterinarian addressed all of my concerns</i>					
<i>I felt that the student veterinarian communicated that they cared about me as a person.</i>					
<i>Overall, I felt that the student veterinarian's interaction with me was effective.</i>					
<i>I would visit this vet / clinic again.</i>					
<b>Comments / Examples:</b> _____					
_____					
_____					

<b>Global Outcome Rating:</b>	<b>YES</b>	<b>NO</b>
<i>Overall, I felt that the student veterinarian's interaction with me was effective.</i>		
<i>I felt like a partner in the conversation with the veterinary student</i>		
<i>I would visit this vet / clinic again.</i>		

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ii. 2<sup>nd</sup> and 3<sup>rd</sup> year form**
**Simulated Client Feedback Form – VetM 407 & VetM 507**

 Place an 'x' or checkmark in the appropriate box beside each statement.  
 Remember to add examples and/or comments for the students to view later.

<b>How did the student do at Initiating the Session?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt connected to the student veterinarian at the beginning of the interaction.</i>					
<i>I felt that the student veterinarian understood the reason for my visit.</i>					
<i>I felt respected by the student veterinarian.</i>					
<b>Comments / Examples:</b> _____					
<b>How did the student do at Gathering Information?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that the student veterinarian encouraged me to tell my story.</i>					
<i>I felt that the student veterinarian listened attentively.</i>					
<i>I felt that the student veterinarian recognized the role this animal plays in my life.</i>					
<b>Comments / Examples:</b> _____					
<b>How did the student do at Providing Structure?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that there was a logical flow to the interaction.</i>					
<i>I felt that the student kept our appointment on track.</i>					
<b>Comments / Examples:</b> _____					
<b>How did the student do at Building a Relationship?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that the student veterinarian was interested in my opinion.</i>					
<i>I felt that the student demonstrated appropriate confidence.</i>					
<i>I felt that the student veterinarian involved me throughout the entire appointment.</i>					



<b>How did the student do at Building a Relationship?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt that the student veterinarian communicated that they cared about me as a person.</i>					
<b>Comments / Examples:</b> _____ _____					
<b>How did the student do at Explaining and Planning?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I understood the student veterinarian's explanation of tests / procedures / diagnoses / treatments / etc.</i>					
<i>I felt that the student veterinarian provided me with enough opportunities to ask questions.</i>					
<i>I felt that the student veterinarian involved me in decisions as much as I wanted.</i>					
<i>I understood the information I received from the student veterinarian.</i>					
<i>I felt the plan the student veterinarian made with me will be manageable for me.</i>					
<b>Comments / Examples:</b> _____ _____					
<b>How did the student do at Closing the Session?</b>	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
<i>I felt the student veterinarian addressed all of my concerns</i>					
<i>I felt that the student veterinarian communicated that they cared about me as a person.</i>					
<b>Comments / Examples:</b> _____ _____					

<b>Global Outcome Rating:</b>	<b>YES</b>	<b>NO</b>
<i>Overall, I felt that the student veterinarian's interaction with me was effective.</i>		
<i>I felt like a partner in the conversation with the veterinary student</i>		
<i>I would visit this vet / clinic again.</i>		

**Additional Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**c. WWW / EBY FORM FOR PEER FEEDBACK**



**UNIVERSITY OF CALGARY**  
FACULTY OF VETERINARY MEDICINE

### Professional Skills Communication Lab:

### Small Group Peer Feedback

Learner \_\_\_\_\_ Observer \_\_\_\_\_

Initiation \_\_\_\_\_ Gathering Information \_\_\_\_\_ Explain & Plan \_\_\_\_\_ Closing \_\_\_\_\_

Structure \_\_\_\_\_ Building a Relationship \_\_\_\_\_

You said you wanted to work on the following (Objectives):
1.
2.
3.
<b>What Worked Well...Even Better Yet</b>
I noticed you did the following that Worked Really Well:
I also noticed the following that you might want to consider to make it Even Better Yet:

**www.eby**

## d. COMPLETE CCG FEEDBACK FORM

Learner name \_\_\_\_\_ Feedback from \_\_\_\_\_ Date \_\_\_\_\_

### Calgary-Cambridge Guides – Communication Process Skills\*

Veterinary Medicine

#### INITIATING THE SESSION

#### COMMENTS

<p><b><u>Preparation</u></b></p> <ol style="list-style-type: none"> <li>1. PUTS ASIDE LAST TASK, attends to self-comfort</li> <li>2. FOCUSES ATTENTION and prepares for this consultation</li> </ol> <p><b><u>Establishing Initial Rapport</u></b></p> <ol style="list-style-type: none"> <li>3. GREETES client &amp; patient and obtains names</li> <li>4. INTRODUCES self, role and nature of visit; obtains consent if necessary</li> <li>5. DEMONSTRATES RESPECT and interest, attends to client's and patient's physical comfort</li> </ol> <p><b><u>Identifying the Reason(s) for the Consultation</u></b></p> <ol style="list-style-type: none"> <li>6. IDENTIFIES PROBLEM LIST or issues client wishes to address with appropriate OPENING QUESTION (e.g. "What would you like to discuss?" or "What questions did you hope to get answered today?")</li> <li>7. LISTENS attentively to the client's opening statement without interrupting or directing client's response</li> <li>8. CONFIRMS LIST AND SCREENS for further problems (e.g. "So that's updating vaccinations &amp; Max seems more tired than usual; anything else?" or "Do you have some other concerns you'd like to discuss today?")</li> <li>9. NEGOTIATES AGENDA taking both client's and own perspectives into account</li> </ol>	
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#### GATHERING INFORMATION

#### COMMENTS

<p><b><u>Exploration of Problem(s)</u></b></p> <ol style="list-style-type: none"> <li>10. ENCOURAGES CLIENT TO TELL STORY of problem(s) from when first started to the present in own words (clarifying reason for presenting now)</li> <li>11. USES OPEN AND CLOSED QUESTIONING technique, appropriately moving from open to closed</li> <li>12. LISTENS ATTENTIVELY, allowing client to complete statements without interruption and leaving space for client to think before answering or go on after pausing</li> <li>13. FACILITATES CLIENT'S RESPONSES VERBALLY &amp; NON-VERBALLY, e.g. by using encouragement, silence, repetition, paraphrasing</li> <li>14. PICKS UP VERBAL AND NON-VERBAL CUES (e.g. body language, facial expression); CHECKS OUT AND ACKNOWLEDGES as appropriate</li> <li>15. CLARIFIES CLIENT'S STATEMENTS that are unclear or need amplification (e.g. "Could you explain what you mean by sore?")</li> <li>16. PERIODICALLY SUMMARIZES to verify understanding of client's comments, invites client to correct interpretation or provide further information</li> <li>17. USES concise, EASILY UNDERSTOOD QUESTIONS AND COMMENTS; avoids or adequately explains jargon</li> <li>18. ESTABLISHES DATES AND SEQUENCE OF EVENTS</li> </ol> <p><b><u>Additional Skills for Understanding the Client's Perspective</u></b></p> <ol style="list-style-type: none"> <li>19. ACTIVELY DETERMINES AND APPROPRIATELY EXPLORES: <ul style="list-style-type: none"> <li>• Client's IDEAS (beliefs regarding cause)</li> <li>• Client's CONCERNS (worries) regarding each problem</li> <li>• Client's EXPECTATIONS (goals, help client expects, cost issues, urgency)</li> <li>• EFFECTS ON CLIENT'S AND ANIMAL'S LIFE</li> <li>• RELATIONSHIP between client, animal, &amp; others</li> </ul> </li> <li>20. ENCOURAGES CLIENT TO EXPRESS FEELINGS</li> </ol>	
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**Additional comments:**

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## PROVIDING STRUCTURE TO THE CONSULTATION

## COMMENTS

<p><b><u>Making Organization Overt</u></b></p> <p>21. SUMMARIZES AT END OF A SPECIFIC LINE OF INQUIRY (e.g. current history) to confirm understanding &amp; ensure no important data was missed; invites client to correct</p> <p>22. PROGRESSES from one section to another USING SIGNPOSTING, TRANSITIONAL STATEMENTS; includes rationale for next section</p> <p><b><u>Attending to Flow</u></b></p> <p>23. STRUCTURES consultation in LOGICAL SEQUENCE</p> <p>24. ATTENDS TO TIMING and keeping consultation on task</p>	
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## BUILDING RELATIONSHIP - *Facilitating Client's Involvement*

## COMMENTS

<p><b><u>Using Appropriate Nonverbal Behavior</u></b></p> <p>25. DEMONSTRATES APPROPRIATE NON-VERBAL BEHAVIOUR</p> <ul style="list-style-type: none"> <li>• eye contact, facial expressions</li> <li>• posture, position, gestures &amp; other movement</li> <li>• vocal cues (e.g. rate, volume, intonation, pitch)</li> </ul> <p>26. IF READS, WRITES NOTES or uses computer, does so IN A MANNER THAT DOES NOT INTERFERE WITH DIALOGUE OR RAPPORT</p> <p>27. DEMONSTRATES appropriate CONFIDENCE</p> <p><b><u>Developing Rapport</u></b></p> <p>28. ACCEPTS LEGITIMACY of client's views and feelings; IS NOT JUDGMENTAL</p> <p>29. USES EMPATHY to communicate understanding and appreciation of client's feelings or situation; overtly ACKNOWLEDGES CLIENT'S VIEWS &amp; FEELINGS</p> <p>30. PROVIDES SUPPORT: expresses concern, understanding, willingness to help; acknowledges efforts and appropriate care; offers partnership</p> <p>31. DEALS SENSITIVELY with embarrassing or disturbing topics and animal's pain, including when associated with physical examination</p> <p><b><u>Involving The Client</u></b></p> <p>32. SHARES THINKING with client to encourage client's involvement (e.g. "What I am thinking now is...")</p> <p>33. EXPLAINS RATIONAL for questions or parts of physical examination that could appear to be non-sequiturs</p> <p>34. When doing PHYSICAL EXAMINATION, explains process, findings</p>	
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**Additional comments:**

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## CLOSING THE SESSION

## COMMENTS

### Forward Planning

55. CONTRACTS WITH CLIENT re: steps for client and veterinarian  
56. SAFETY NETS, explaining possible unexpected outcomes, what to do if plan is not working, when and how to seek help

### Ensuring Appropriate Point of Closure

57. SUMMARIZES SESSION briefly and clarifies plan of care  
58. FINAL CHECK that client agrees and is comfortable with plan and asks if any correction, questions or other items to discuss

## OPTIONS IN EXPLANATION & PLANNING

## COMMENTS

### IF Discussion Opinion and Significance of Problem

59. OFFERS OPINION of what is going on and names if possible  
60. REVEALS RATIONALE for opinion  
61. EXPLAINS causation, seriousness, expected outcome, short & long term consequences  
62. ELICITS CLIENT'S BELIEFS, REACTIONS AND CONCERNS (e.g. if opinion matches client's thoughts, acceptability, feelings)

### IF Negotiating Mutual Plan Of Action

63. DISCUSSES OPTIONS (e.g. no action, investigation, medication, non-drug treatments, fluids, surgery, behavioral consult, preventative measures, euthanasia/cull)  
64. PROVIDES INFORMATION on action or treatment offered  
a) name  
b) steps involved, how it works  
c) benefits and advantages  
d) possible side effects, risks  
65. OBTAINS CLIENT'S VIEW of NEED for action, BENEFITS, BARRIERS, MOTIVATION; accepts and advocates alternative viewpoint as needed  
66. ACCEPTS client's views; advocates alternative viewpoint as necessary  
67. ELICITS CLIENT'S UNDERSTANDING, REACTIONS AND CONCERNS about plans and treatments, including acceptability  
68. TAKES CLIENT'S LIFESTYLE, BELIEFS, cultural BACKGROUND and ABILITIES INTO CONSIDERATION  
69. ENCOURAGES CLIENT TO BE INVOLVED in implementing plans and TO FOLLOW THROUGH  
70. ASKS ABOUT CLIENT SUPPORT NETWORKS, discusses other options

### IF Discussing Investigations and Procedures

71. PROVIDES CLEAR INFORMATION ON PROCEDURES including what client might experience and how client will be informed of results  
72. RELATES PROCEDURE TO TREATMENT PLAN: value and purpose  
73. ENCOURAGES QUESTIONS AND EXPRESSION OF THOUGHTS re: potential anxieties or negative outcome

Additional comments:

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Learner Name \_\_\_\_\_ Feedback from \_\_\_\_\_ Date \_\_\_\_\_

**Calgary-Cambridge Guides – Content\***  
**Veterinary Medicine**

**SIGNALMENT** (animal ID, breed, age, sex, reproductive history, work history, etc.)

**PATIENT'S AND/OR HERD, FLOCK, ETC. PROBLEM LIST**

**PRESENT HISTORY - EXPLORATION OF PATIENT'S PROBLEMS (including flock, herd, etc. issues)**

<b><i>Veterinary Medical Perspective</i></b>	<b><i>Client Perspective</i></b>
Sequence of events + Analysis of signs + Relevant systems review	<ul style="list-style-type: none"><li>• Ideas and beliefs</li><li>• Concerns and feelings</li><li>• Expectations</li><li>• Effects on life (of animal and client)</li><li>• Relationship between animal and client, others</li></ul>

**BACKGROUND INFORMATION - CONTEXT**

- Environment and life style (e.g. living quarters, diet, exercise, daily routines, proximity of other animals, etc.)
- Past medical history (illnesses, surgeries, trauma, preventive care)
- Current medications, adverse drug reactions, & allergies (drug and other)
- Genetic and familial background
- Behavioral/social history
- Review of systems

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**PHYSICAL EXAMINATION****DIFFERENTIAL DIAGNOSIS - HYPOTHESES**

- Including both veterinarian's and client's ideas

**VETERINARIAN'S PLAN OF MANAGEMENT**

- Investigations
  
  
  
  
  
  
  
  
  
  
- Treatment alternatives

**EXPLANATION AND PLANNING WITH CLIENT**

- What the client has been told
  
  
  
  
  
  
  
  
  
  
- Plan of action negotiated

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