

COVID-19 TELEMEDICINE

Relationship-Centered COMMUNICATION Skills



This is a challenging time for healthcare, and for communicating in healthcare encounters. We offer the following examples, reflective of ACH's broader training materials.

Note: In this era of rapidly evolving practice as well as wide regional variations due to incidence and resources, individual recommendations may or may not resonate with local practices. Given the very fast changes, we welcome your feedback.

The Academy of Communication in Healthcare

Beginning the Encounter: Skill Set 1

Create Rapport Quickly

Greeting:	<i>Make sure their device and yours are propped up so you can see each other, and try to match the size of your faces in the screens if possible. Start with a warm greeting.</i> <i>"So nice to see your face. Sorry this couldn't be in person, but glad we can chat safely."</i>
Introductions:	<i>State your name and role first. Then, ask for verbal consent to the telemedicine visit, and make sure the patient is in a suitably private space and has only the persons present that they give permission to participate.</i> <i>"I just want to check again that you give permission for this visit, and that you are in a private place where only the people you want in the room with you are there. Can you tell me your full name and date of birth? Who else is with you today?"</i>
Small talk before big talk:	<i>"Did you have any trouble getting set up for the call today?" (Resist the urge to ask how they are feeling about coronavirus at this point)</i>
Minimize barriers:	<i>"Can you see and hear me okay? Any adjustments I can make so you are more comfortable?"</i>
Time:	<i>"We have about 15 minutes together today so I want to make sure we address your most pressing concerns."</i>

Elicit the LIST of All of the Patient's Concerns

Acknowledge each item:	<i>"You've developed a cough and you are concerned it could be coronavirus. That's important to discuss. What else is on your list?"</i>
"What else?"	<i>Exhaustive "What else?" until the patient states: "That's everything."</i>

Negotiate the Agenda

Establish the patient's priorities:	<i>"Of all the things you listed, what are the most important for us to cover today in the time we have?"</i>
State your clinical goals:	<i>"Given that I'm not likely to see you in person for a few months, what refills will you need?"</i>
Negotiate a plan for the visit:	<i>"I'd definitely like to talk more about your cough and concerns about coronavirus, and to review your blood pressure log with you. We'll talk about your refills. Is it okay if we leave the back pain that doesn't sound like it has changed for another time?"</i>

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Relationship-Centered Conversation: Skill Set 2

Open the Conversation

Open-ended question/request:	<i>"Tell me all about this cough." (Try not to interrupt until patient stops)</i>
Attentive and reflective listening:	<i>"So the cough started a few days ago after you worked in the yard, and you noticed some itching in your eyes and some sneezing. You started to get worried. What did I miss?"</i>

Explore Perspectives and Name Emotion

Ask about ideas, impact, and expectations:	<i>"What ideas do you have about what might be causing this cough?"</i> <i>"How is this impacting you now? What would the impact be if you do have coronavirus?"</i> <i>"What are your expectations about what we can do for you today?"</i>
Explore and name emotions:	<i>"How are you feeling about all this?"</i> <i>"I'm hearing you're feeling upset."</i>

Respond with Empathy – PEARLS

Partnership:	<i>"Let's work on figuring out if you have coronavirus together." "Let's plan together how you are going to self-isolate at home and what to tell your family."</i>
Emotion:	<i>"I can imagine how scary this must be for you, especially since cough is one of the major symptoms."</i>
Apology/Appreciation:	<i>"I am sorry that we don't have enough tests for everyone right now. I wish we did."</i> <i>"I appreciate your bringing up your concerns about this."</i>
Respect:	<i>"This has been a difficult time for you and your family with your mother in the ICU and your brother with symptoms at home."</i>
Legitimization:	<i>"Most people who get a cough right now would be concerned."</i> <i>"It is normal to be stressed when waiting for a test result."</i>
Support:	<i>"I'm going to stick with you through this, from the testing through the treatment."</i>

➤ COVID-19 Quick Tips to Connect: <http://www.achonline.org/COVID-19/Quick-Tips>

➤ Sample Statements ART (Ask-Respond-Tell): <http://www.achonline.org/COVID-19/ART>

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Ending the Encounter. Skill Set 3

Share Information

Orient the patient to the end of the encounter :	<i>"We have just a few minutes left with our call, and I want to summarize and plan next steps. From what I have gathered from my questions, I am concerned you may need to be tested for coronavirus."</i>
Incorporate the patient's perspective :	<i>"You are worried about what this will mean to your family if you do have coronavirus, and we can review the best way to protect them."</i>

Ask, Respond, and Tell (ART)

Ask:	<i>"What do you know about how coronavirus infection is treated?"</i>
Respond:	<i>"That's right - there aren't any medicines that work to cure it at this time."</i>
Tell:	<i>"There are some medicines that might make you feel more comfortable . . ."</i>
Ask:	<i>"Have you heard about self-isolation?"</i> <i>"What does that mean to you?"</i>
Respond:	<i>"Yes. You will have to stay in your bedroom and be the only one to use the back bathroom. That sounds like it will be hard for you, and I appreciate how you want to make sure no one else gets sick."</i>
Tell:	<i>"Here are some other things to do to keep your family safe . . ."</i>

Assess Understanding

Ask:	<i>Teach-back.</i> <i>"I have given you a lot of information, and I want to be sure that I was clear. What are you going to tell your family about self-isolation?"</i>
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Close the visit

Conclude:	<i>Clarify the plan as needed.</i> <i>"I am glad we talked today. Please call with further questions."</i>
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