## **MEDTAPP** Healthcare Access Initiative Effective Communication Self-Evaluation

|           | Learner:  |           | Program:  |   |  | Faculty Reviewer:   |   |
|-----------|-----------|-----------|---|---|--|---------------------|---|
|           | Pat       | tient:    | Gender  | Age   | New/Established                                | Date of Recording   |   |
| Beginning |           | •         | Uses words that Uses tone and pa ns the Discussi  Allows patient to Asks "Is there as | s interest in patient as a p<br>show care, concern, and a<br>ace to show care and conc                          | nent without interruption<br>1 set of concerns | YES YES YES         | ptable Excellent  NO NO NO Detable Excellent  NO NO NO NO NO NO NO NO |
| Madle     | C.        | Gath      | ners Informatio   | on  |  | N.I.* Acce          | ptable Excellent  |
|           | D.        | Unde      | Summarizes and Actively listens   | I questions and clarifies v<br>gives patient opportunity<br>and transitions effectively<br>atient's Perspective | to correct or add info                         |                     | NO<br>NO<br>NO<br>ptable Excellent                                    |
|           |           | •         | Elicits patient's   | ts, circumstances, people<br>beliefs, concerns, and exp   | ectations                                      | YES<br>YES          | NO<br>NO  |
|           | E.        | •<br>Shar | Responds explic   | • •   | s about ideas and feelings                     | YES  N.I.*  Acce    | NO Excellent  |
|           |           | •         | _   | 's understanding of probly<br>vords patient can understa  | em and desire for more info                    | YES YES             | NO<br>NO  |
|           |           | •         |   | ance understanding  |  | YES                 | NO  |
|           | L         | •         | Communicates of   | luring physical exam  |  | YES                 | NO  |
| End       | <b>F.</b> | Reac      | ches Agreemen   | t   |  |                     | ptable Excellent  |
|           |           | •         |   | lecision making and elicit  | •  | YES                 | NO  |
|           |           | •         | _   | ent's ability/confidence to<br>onal resources as appropri   | o follow diagnostic/treatmentate               | nt plans YES<br>YES | NO<br>NO  |
|           | G.        | Prov      | ides Closure  | mar resources as appropri   |  |                     | ptable Excellent  |
|           |           | •         | Asks if patient h   | as questions or concerns  |  | YES                 | NO  |
|           |           | •         |   | s teach-back method to re   | _  | YES                 | NO<br>NO  |
|           |           | •         | Acknowledges p  | atient and closes intervie  | W  | YES                 | NO  |

| Please identify the top 2-3 things you did well during this encounter:                                |  |  |  |  |  |
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| List any health behaviors or concerns about safety you identified during the encounter:               |  |  |  |  |  |
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| What are some counseling approaches or safety plans you employed or might try with this patient?      |  |  |  |  |  |
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| Please identify 2-3 things you would like to do differently or work on during you next encounter:     |  |  |  |  |  |
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| Please add feedback to the faculty about the process of taping the encounter and completing the form: |  |  |  |  |  |
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