Fullscript

Healthcare provider communication: Self-assessment form

Date:

Provider name:

After a patient encounter, rate your level of agreement with the statements below. This is a subjective assessment; however, it will allow you to examine your communication skills. After completing the assessment, think about how you could improve your communication skills. (Brega et al., 2015)

| Linguistic preferences | Yes | No | Not applicable |
|--|-----|----|----------------|
| I asked the patient what language they preferred to speak and read. | | | |
| I used an " <u>I speak</u> " card to identify the patient's spoken language. | | | |
| I noted their linguistic preferences in their medical record for future reference. | | | |

| Non-verbal communication | Yes | No | Not applicable |
|---|-----|----|----------------|
| I greeted the patient with a kind, welcoming attitude. | | | |
| I maintained appropriate eye contact while speaking with the patient. | | | |
| I listened without interrupting. | | | |

| Verbal communication | Yes | No | Not applicable |
|---|-----|----|----------------|
| I spoke clearly and at a moderate pace. | | | |
| l used everyday, non-medical language. | | | |
| Whenever I used medical terminology, I explained the word using everyday, non-medical language. | | | |
| I limited the discussion to three key points or topics. | | | |
| I gave specific, concrete explanations and instructions. | | | |
| I repeated the key points. | | | |
| I used pictures or diagrams to help explain something to my patient. | | | |

| Questions asking | Yes | No | Not applicable |
|---|-----|----|----------------|
| I encouraged the patient to voice their questions throughout the visit. | | | |
| I asked the patient what questions they had. | | | |
| l used open-ended questions. | | | |
| I answered all the patient's questions clearly. | | | |

| Educational materials | Yes | No | Not applicable |
|--|-----|----|----------------|
| I provided educational materials in the patient's preferred language. | | | |
| I reviewed the educational materials with the patient. | | | |
| I circled or highlighted relevant and essential information on the provided educational material. | | | |
| I followed up with the patient regarding the educational materials provided during the previous appointment. | | | |

| The teach-back method | Yes | No | Not applicable |
|--|-----|----|----------------|
| I took responsibility for making sure I was clear. | | | |
| l used the teach-back method to confirm the patient understood the information provided. | | | |
| I documented the use of teach-back and the patient's responses in their medical record. | | | |

| Additional notes and comments | |
|-------------------------------|--|
| | |
| | |
| | |
| | |
| | |
| | |

Reference

 Brega, A., Barnard, J., Mabachi, N., Weiss, B., DeWalt, D., Brach, C., Cifuentes, M., Albright, K., & West, D. (2015, February). Health Literacy Universal Precautions Toolkit, 2nd Edition. AHRQ. <u>https://www.ahrq.gov/health-literacy/improve/precautions/toolkit.html</u>

V Fullscript

For more educational content and resources: www.fullscript.com/learn



This handout was developed and medically reviewed by Fullscript's Integrative Medical Advisory team. *These statements have not been evaluated by the Food and Drug Administration. This information is not intended to diagnose, treat, cure, or prevent any disease.

Updated: October 2022