## Competency

**Interpersonal and Communication Skills**

### Sub Domain

**Collaborative Relationships**

### Learning Objective

1. Establishes and maintains effective, collaborative, empathic, and therapeutic relationships with patients and families
2. Establishes and maintains effective, collaborative relationships with all members of the interprofessional team

### Milestones

<table>
<thead>
<tr>
<th>Year I</th>
<th>Year II</th>
<th>Year III</th>
<th>Year IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid</td>
<td>End</td>
<td>Mid</td>
<td>End</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mid</td>
<td>End</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mid</td>
<td>End</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mid</td>
<td>End</td>
</tr>
</tbody>
</table>

- **Year I**
  - Defines the elements of a therapeutic relationship* and factors that create and maintain it (1)
  - Identifies elements of communication and constructive professional relationships ** (2)
  - Describes importance of team-based care and appreciates the role of each team member (2)
  - Defines elements of formative feedback *** (2)

- **Year II**
  - Describes how the therapeutic relationship affects the healing process and the clinician (1)
  - Develops a therapeutic relationship while obtaining a history (1)
  - Practices providing feedback to peers (2)
  - Practices giving feedback incorporating all key elements of effective feedback exchange (2)

- **Year III**
  - Describes strategies for dealing with the influence of non-patient related factors † on the therapeutic relationship (1)
  - Explains how to work effectively in a multidisciplinary team †† (2)

- **Year IV**
  - Develops a therapeutic relationship that is interpersonally challenging while completing a history, assessment and treatment plan † (1)
  - Uses strategies for dealing with the influence of non-patient related factors †† on the therapeutic relationship (1)
  - Uses strategies in managing conflicts within the team (2)
  - Demonstrates how to work effectively in a multidisciplinary team ††† (2)
  - Demonstrates how to work effectively in a multidisciplinary team ††† (2)
  - Develops a therapeutic relationship with patient and family while managing multiple patients and developing practical assessments and treatment plans (1)
  - Describes and demonstrates key elements of leadership in team-based care (2)
  - Models, supports, and teaches clerkship students to develop communication competencies (1,2)
Appendix

*Therapeutic relationship elements:* Safety, confidentiality, healing, awareness of power differences, unconditional positive regard, respect, boundaries, physical space, psychosocial environment

**Examples of elements of communication and professional relationships:**

- Appreciate the important role of professional relationships in the health professions
- Describe the elements of a positive professional relationships (and qualities/examples of when it goes wrong). These relationships may be between individuals, within groups, and with institutions. The elements include:
  - collaboration (vs. accommodating/compromising/competing)
  - mutual respect
  - ability to develop common ground
  - inclusiveness of the perspectives of other colleagues
  - effective feedback exchange
  - active listening
  - effective conflict management.

- Discuss the new roles that learners assume as first year medical students, as adult learners (in various small group and large group formats), peer, beneficiaries of medical education resources, volunteer/clinician/beginner clinician. The term ‘medical education resources’ acknowledges that medical students are among a select group who are granted access to medical school infrastructure and resources.
- Identify the stakeholders of these roles: themselves, other medical students, staff, mentors, and faculty
- Recognize that there are various interactional styles (Myers Briggs/Colors) that impact their professional relationships.
- Identify one’s learning and interactional style and describe how it plays out in their own relationships

***Feedback Definition:** Information provided to help with making adjustments/corrections/improvements/refinement in order to achieve the learning objectives of the recipient (i.e. student, peers, faculty, staff). Not just evaluation.

*Elements of Effective Feedback:*

- Specific
- Helps individual progress towards their learning objectives
- Mutual respect
- With the premise that there is the capacity for improvement
- Reciprocal dialogue
- Timely
- Relevant and applicable
- Learning objective(s) are mutually agreed upon by recipient and provider
- Collaborative professional relationships are necessary for and require effective feedback
- To give and receive feedback, while useful, may be inherently uncomfortable

*Role of Recipient and Providers of Feedback:*

**Recipients are able to:**

- discuss their learning goals
- contribute to safe learning environment
- recognize that effective feedback is usually uncomfortable
- be open to potential for improvement through feedback
• critically appraise the feedback
• constructively discuss feedback received
• mutually arrive at a meaningful assessment and plan of action towards learning objective

Providers are able to:
• discuss learning goals
• contribute to safe learning environment
• have given thoughtful and diligent assessment of the learner’s assets and needs prior to the exchange
• recognize that effective feedback is usually uncomfortable
• assess recipient’s level of readiness for feedback
• identify and address barriers to receiving feedback
• develop a safe space for discussion and critical appraisal of the feedback given
• mutually arrive at a meaningful assessment and plan of action towards learning objective

† Examples of professional relationship development:
• able to discuss the new roles that learners assume: student leaders, representative of the health professions and UCDHS to communities, adult learners (in various small group and large group formats), peer, beneficiaries of medical education resources
• describe the various interactional styles (Myers Briggs/ Colors) and how these can impact their professional relationships
• able to discuss each other’s interactional styles with peers and faculty
• appreciate the contributions of people with diverse interactional styles to the professional relationships

‡ Such as hidden curriculum, competing expectations, burnout, time pressures, systems issues. [Hidden curriculum: The set of influences, pressures, and constraints that function at the level of organizational structure and culture including, for example, implicit rules to survive the institution such as customs, rituals, and taken-for-granted aspects that are often unarticulated or unexplored. (from: Lemp, H. and C. Seale, The hidden curriculum in undergraduate medical education: qualitative study of medical students’ perceptions of teaching. Br Med J 329:770-779, 2004)]

†† Examples of challenges to developing and maintaining professional relationships inherent in working in health care: systems conflicts, interpatient conflicts, Maslow conflicts, values conflicts, role transitions and ambiguity, hierarchical/power conflicts

§ Examples of interpersonally challenging therapeutic relationships: personality problems, communication barriers, cultural bias, generational conflicts