Cultural and Linguistic Competency
This activity is in compliance with California Assembly Bill 1195 which requires continuing medical education activities with patient care components to include curriculum in the subjects of cultural and linguistic competency. Cultural competency is defined as a set of integrated attitudes, knowledge, and skills that enables health care professionals or organizations to care effectively for patients from diverse cultures, groups, and communities. Linguistic competency is defined as the ability of a physician or surgeon to provide patients who do not speak English or who have limited ability to speak English, direct communication in the patient’s primary language. Cultural and linguistic competency was incorporated into the planning of this activity. Additional resources on cultural and linguistic competency and information about AB1195 can be found on the UCSD CME website at http://cme.ucsd.edu.

Faculty Disclosure
It is the policy of the University of California, San Diego School of Medicine to ensure balance, independence, objectivity and scientific rigor. All persons involved in the selection, development and presentation of content are required to disclose any real or apparent conflicts of interest. All conflicts of interest will be resolved prior to an educational activity being delivered to learners through one of the following mechanisms 1) altering the financial relationship with the commercial interest, 2) altering the individual’s control over CME content about the products or services of the commercial interest, and/or 3) validating the activity content through independent peer review. All persons are also required to disclose any discussions of off label/unapproved uses of drugs or devices. Persons who refuse or fail to disclose will be disqualified from participating in the CME activity.

Course Director:
David E.J. Bazzo, M.D. FAAFP

This workshop is authorized by and designed in conjunction with the Institute for Healthcare Communication.

The Institute for Healthcare Communication designates this live activity for a maximum of 8 AMA PRA Category 1 Credits™.

Physicians should claim only credit commensurate with the extent of their participation in the activity.

Cost = $750
The Physician-Patient Communication Program is offered through the UCSD Physician Assessment and Clinical Education (PACE) Program. The UCSD PACE Program is the largest program for physician enhancement in North America.

The Physician-Patient Communication Program is an intensive one-day fast-paced interactive program, that assists the professional in enhancing his or her communication skills. The Physician-Communication Program provides participants with a conceptual model for effective clinician-patient communication. Effective communication between a clinician and a patient is a necessity, not an option.

Recent research has shown an important link between communication skills and health outcomes. It has now become clear that improved diagnostic accuracy, greater patient involvement in decision making, and increased likelihood of adherence to therapeutic regimes are all associated with effective physician-patient communication. Additional benefits are increased patient and clinician satisfaction, and reduced likelihood of malpractice litigation.

This program is highly experiential, helping to facilitate active learning and promote lasting change.

This full day workshop is for groups ranging from 6 to 10 participants. The program is designed to provide participants with opportunities to practice skills and techniques, not simply hear about them. The workshop intersperses brief lecture-discussions on clinician-patient communication research and techniques with interactive exercises. Participants analyze videotaped re-enactments of actual cases, reach agreement on what was and wasn’t effective in the cases, and then create responses that would be more effective.

Participants have the opportunity to work together to develop approaches to patients they are currently working with in their practice. Finally, participants are asked to choose one or two techniques that they can immediately use in their practice settings.

Research suggests that good physician patient communication skills are associated with improved health outcomes, an increase in patient and clinician satisfaction, and a reduced likelihood of malpractice litigation.

**Needs Assessment:**

The average clinician may perform as many as 160,000 patient interviews during a medical career. However, frequently techniques are not used that can improve diagnostic accuracy, involve the patient in decision making and increase the likelihood of adherence to the desired regimen. Clinicians may not have learned these techniques during their medical training. Some of the techniques may have been developed since the clinician was trained. The challenge is to introduce the techniques to clinicians and develop their skills in using techniques in a brief period of time.

**Who is the Program for?**

This intensive training program has been developed to meet the needs of the professional who:

- Desires to improve his or her communication skills, diagnostic accuracy, and physician and patient satisfaction.
- Wants to enhance patient compliance and reduce the likelihood of malpractice litigation.
- Has been referred by courts and/or licensing boards as part of alternative sentencing.
- Has been referred by human resources and/or risk management departments as part of employee probation.
- Is attorney referred as part of an Alternative Dispute Resolution agreement.

**Training Goals and Objectives**

- To develop a greater understanding of effective communication skills that will lead to desired clinical outcomes.
- To educate physicians about the importance of physician-patient communication as an essential aspect of health care.
- To address the notion that complete clinical care consists of more than “find it and fix it.”
- To teach the four communication components: Engage, Empathize, Educate and Enlist.
- To encourage behavioral change through the use of lecture discussions, observation, and role-playing.