
C10: Is Anybody Listening? Facilitating Communication during the Evaluation Process Toward a Functional Outcome

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Learning objectives:

1. Participant will be able to state at least 2 verbal and non-verbal styles of communication paramount to communicating to a client during the evaluation process.
2. Participant will be able to identify at least two different learning styles and how to address them during the interview/evaluation process.
3. Participant will be able to name at least 3 pertinent questions specific to client “story” that will directly impact addressing their functional outcome.

Session description:

In our field of seating and mobility, there seems to be far more demand than there are experienced people to provide services. It is not unusual for one or more of the team members to lack experience. It becomes incumbent on the team members to ensure the necessary information is collected for the best possible outcome for the client. Part of that is ensuring that good communication is exchanged. Client “stories” enable us to understand as much as we can, the heart and soul of the person sitting in the evaluation. The way we should approach individuals and, when relevant, families and caregivers, has a lot to do with who they are: or, especially in the case of a severe new injury or illness, who they were. We need to move from “what’s the matter”, to “what matters to you”. There are many things that get in the way of good communication:

- Electronic means of recording medical records has certainly had its advantages: but in many ways, it has made it more difficult to record that information and pay attention to the client.
- Team members have sometimes widely varying levels of experience, and have

different information needs from the evaluation.

This course will address verbal and non-verbal communication on the part of the team as well as the client through the evaluation process. We will begin with a section on communication styles, what constitutes good verbal and non-verbal communication. Specific case studies (video and slide) will be presented in parts so that the participants can address what they would ask in breakout groups. Rather than focusing on specific solutions, they will be asked to suggest questions to ask that could affect the outcome.

Content references

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3. Robert C. Smith, MD, MS1, Francesca C. Dwamena, MD, MS1, Madhusudan Grover, MD2, John Coffey, MLS1, and Richard M. Frankel, PhD3, (2010). **Behaviorally Defined Patient-Centered Communication—A Narrative Review of the Literature**, Michigan State University, East Lansing, MI, USA; 2Mayo Clinic, Rochester, MN, USA; Indiana University, Indianapolis, IN, USA. *J Gen Intern Med* 26(2):185–91, DOI: 10.1007/s11606-010-1496-5, © Society of General Internal Medicine 2010
4. Robert C. Smith*, Alicia A. Marshall-Dorsey1, Gerald G. Osborn, Valerie Shebroe, Judith S. Lyles, Bertram E. Stoffelmayr, Lawrence F. Van Egeren, Jennifer Mettler, Karen Maduschke, Jennifer M. Stanley, Joseph C. Gardiner, **Evidence-based guidelines for teaching patient-centered interviewing, From the Departments of Medicine, Family Practice, Communication, Psychiatry, Psychology, and Epidemiology**, Michigan State University, East Lansing, MI 48824, USA Received 5 January 1999; received in revised form 20 July 1999; accepted 3 September 1999
5. Vogel, K. A., Geelhoed, M., Grice, K.O., Murhy, D., (2009). **Do Occupational Therapy and**

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