

Virtual Health Grand Rounds: USING TECHNOLOGY TO ENHANCE COMMUNICATION IN HEALTH CARE

Prof. Dr. med. Christian Juhra, MBA

January 20th 2023 | 0800-0900



THE UNIVERSITY OF BRITISH COLUMBIA

Continuing Professional Development

Faculty of Medicine

LAND ACKNOWLEDGMENT

We acknowledge that we work on the traditional, ancestral and unceded territory of the Skwxwú7mesh (Squamish), x^wməθkwəy̓əm (Musqueam), and Səlílwətaʔ/Selilwitulh (Tsleil-Waututh) Nations.



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

PRESENTER DISCLOSURES

Prof. Dr. med. Christian Juhra, MBA has received direct financial payments from:

- Consus Healthcare
- L&B Medical
- Pfizer
- Apollon University

Prof. Dr. med. Christian Juhra, MBA has received funding from:

- Government of Northrhine-Westfalia
- German Innovation Fund



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT



LEARNING OBJECTIVES

- Define the different elements of communication
- Assess communication technology and identify the best option
- Utilize technology-enabled communication to enhance patient care



QUESTION:

Why do we communicate?



UBC CPD
Medicine

CONTINUING
PROFESSIONAL
DEVELOPMENT

WHY DO WE COMMUNICATE

- Exchange of information
- Exchange of feelings
- Build relationships
- Build trust
- Make decisions



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

HOW DO WE COMMUNICATE

- Words
- Speech / vocal components
- Facial components
- Body components
- Smell / fragrance
- External components (clothing, room, appearance, etc.)
- Touch / feel

We use ALL our senses to communicate.



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

HOW DO WE COMMUNICATE

According to Mehrabian, Communication is:

- 7% words
- 38% voice
- 55% mimic / body language

However, this 7-38-55 rule is regarded critically...

→ Non-verbal communication is a crucial aspect of communication!



EXAMPLE

Email

To: YOU

From: YOUR BOSS

Please come to my office at 4pm.



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

EXAMPLE: COME TO MY OFFICE

Information exchanged: Come to your boss' office at 4pm.

Is this enough information for you?

- Why do you need to go?
- Good or bad?
- Anything went wrong before?



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

INFORMATION

“The value of information is based on the ability to take action. Data in and of itself is worthless. Its value derives from getting the right information to the right person at the right time. This translates into good decisions that can help avert costly repairs or catastrophic equipment failures.”

- (EPRI (Electronic Power Plan Research Institute) Principal Project Manager Susan Maley)



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

GOALS OF COMMUNICATION IN MEDICINE

What are our goals in communicating with patients?



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

GOALS OF COMMUNICATION IN MEDICINE

- Learn about their illness / medical history
- Create a safe atmosphere
- How do they feel?
- Build up trust!
- Did they understand everything? (Just saying so is not enough!)
- Obtain patient consent (future therapy / diagnostics etc.)



GOALS OF COMMUNICATION IN MEDICINE



© monkeybusinessimages / iStock



<https://www.aerzteblatt.de/archiv/143422/Die-Arzt-Patient-Beziehung-Sieben-Tipps-wie-Sie-die-Kommunikation-mit-den-Patienten-verbessern>

Eye level – be on par with the patient (same in video communication!)

The patient must not look up to the doctor!



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

GOALS OF COMMUNICATION IN MEDICINE



© mauritius images / imageBROKER / Jochen Tack



<https://beyondhealth.de/corporate-blog/so-gelingt-die-kommunikation-zwischen-arzt-und-patient>



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

Distance?

Who else is listening? (Privacy!)

DIGITAL COMMUNICATION

Words (letter, email, messenger)

Voice (telephone, voice over IP)

Video (zoom, teams, etc.)

Virtual Reality?

Technical complexity

Level of information



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

VIDEO COMMUNICATION

Pros:

- See the patient (face / mimic)
- See the surrounding (home situation)
- No traveling over long distances → higher adherence to appointments
- Easier to integrate relatives / friends in discussions
- Better than phone



VIDEO COMMUNICATION

Cons:

- Do not see the whole patient (body language)
- Limited examination possibilities (more possible than you might think)
- Technological barriers
- Limited experience on both sides
- Worse than personal contact



SUCCESS FACTORS



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

SUCCESS FACTORS

Video Communication works, if:

- Good internet connection
- Good hardware (camera, micro etc.) (needs investment)
- Good training (doc-2-doc communication)
- People trust each other
- Technology enhances processes, does not hinder them
- Is supported by the leading management



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

SUCCESS FACTORS

Not every patient is capable of video communication
(technology, language, education)

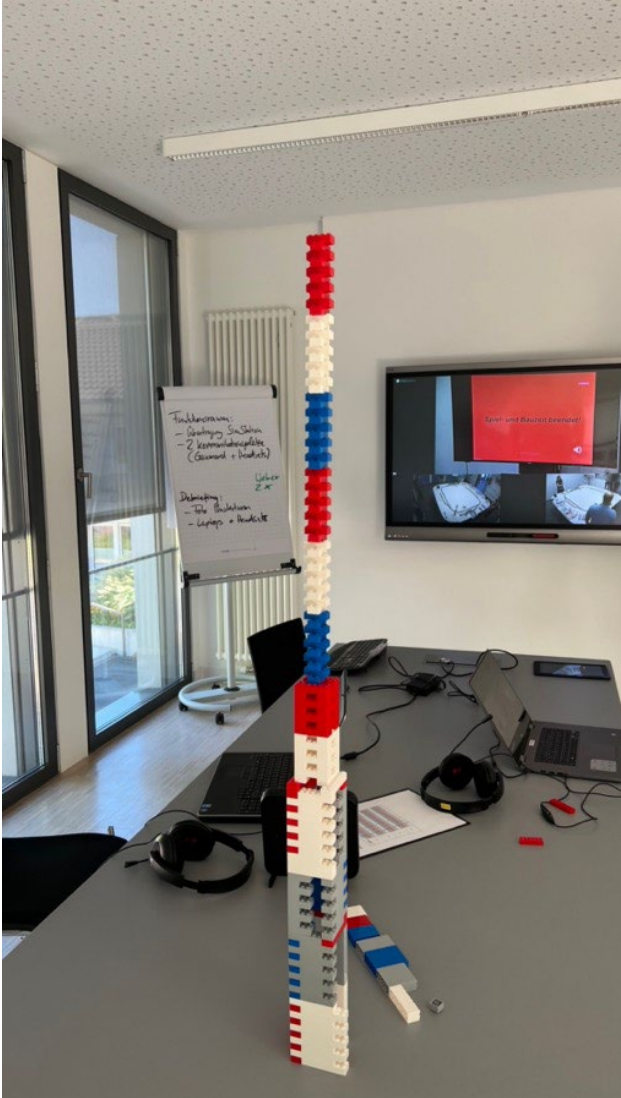
Not every reason for communication is suitable for video
communication

Not every physician is capable of good video communication
(some more than others)



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

COMMUNICATION TRAINING



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

COMMUNICATION TRAINING



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT

GOOD VIDEO COMMUNICATION

- Be professional (clothing, surrounding, light, camera position)
- Know the technology and feel safe with it (or leave it)
- Know the patient (if possible), what is the best way to communicate with them?
- Create trust and safety
- Make sure the patient understands you (words and content) – ask at the beginning if everything works



RESOURCES MENTIONED

- Eilert, D. W. (2017). Reliable Emotional Action Decoding Test (READ-49): Testdokumentation. Retrieved from <http://www.mimikresonanz.org>
- Mehrabian, A., & Ferris, S. R. (1967). Inference of attitudes from nonverbal communication in two channels. *Journal Of Consulting Psychology*, 31(3), 248.
- Mehrabian, A., & Wiener, M. (1967). Decoding of inconsistent communications. *Journal of Personality and Social Psychology*, 6(1), 109.
- <https://eprijournal.com/getting-the-right-information-to-the-right-person-at-the-right-time/> (January 6th 2023)





THANK YOU!
ANY QUESTIONS?



UBC CPD
Medicine
CONTINUING
PROFESSIONAL
DEVELOPMENT



THE UNIVERSITY OF BRITISH COLUMBIA

Continuing Professional Development

Faculty of Medicine

THE UNIVERSITY OF BRITISH