The Health Professionals Core Communication Curriculum (HPCCC):
Objectives for undergraduate education in health care professions

Please take a look at the table of learning objectives below. More information on the importance of each learning objective can be found [here](#).

	A. Communication with patients
	Core communication objectives:
	The student…
1	Shapes a conversation from beginning to end with regard to **structure** (e.g. introduction, initiating the conversation, gathering and giving information, planning, closing interview, setting up next meeting; time management).
2	Elicits and explores the **content** of the patient's bio-psycho-social history (e.g. gathers relevant information, ensures understanding, relays information understandably, verbalises emotional content).
3	Uses techniques to build up and maintain **rapport and an empathetic relationship** and ensures that **the patient feels attended and listened** to.
4	Uses techniques of **active listening** (e.g. reflection, picking up patient´s cues, paraphrasing, summarising, verbal and non-verbal techniques).
5	Uses different **types of questions** (e.g. open, closed and focused) according to the situation.
6	Shows **awareness of the non-verbal communication of both** the patient and the healthcare professional (e.g. eye contact, gestures, facial expressions, posture) and responds to them appropriately.
7	Encourages the patient to express own **ideas, concerns, expectations and feelings** and accepts **legitimacy of patient's views and feelings.**
8	**Gives information** to the patient (oral, written, electronic and over the phone) in a timely, comprehensive and meaningful manner.
9	Adapts own communication to the **level of understanding and language** of the patient, avoiding jargon.
10	Recognises **difficult situations and communication challenges** (e.g. crying, strong emotional feelings, interruptions, aggression, anger, anxiety, embarrassing or sensitive issues, cognitive impairment, delivering bad news) and **deals with them sensitively and constructively.**
11	Relates to the patient **respectfully** including ensuring confidentiality, privacy and autonomy and recognizes the **patient as a partner** in shaping a relationship.
	More detailed specific objectives, depending on context and situation:
	Shaping of relationship: *The student involves the patient in the interaction to establish a therapeutic relationship using a patient-centred approach*
12	**Identifies patient expectations** with respect to the role of health care professional.
13	Uses adequate **strategies to solve conflicts** (e.g. feedback on perception, impact, wishes).
	Patient's perspective and health beliefs: *The student orients own communication in line with the actual needs and concerns of the patient*
14	Elicits the **needs and capabilities of the patient** (e.g information, autonomy, truth and responsibility) and **adapts the plan / intervention** to patient´s resources and strengths.
15	Considers **somatic, mental, social, gender, cultural, ethical and spiritual** elements in the care and assessment of the patient and perceives divergences between own values and norms and the patient's.
16	Responds to the **patient's health beliefs and theories of illness** and contrasts and integrates these into own theories of illness as a health care professional.
	Information: *The student effectively collects and communicates relevant information for reasoning and decision-making*

17	Elicits and **synthesises information** for patient care.
18	Considers **different elements of a patient history** (history of the illness, history of the health care professional–patient relationship, history of the patient).
19	Seeks out and synthesises relevant information **from other sources** (e.g. patient's family, caregivers and other professionals), if necessary and available
20	Inquires about the **patient's level of knowledge** about the illness
21	Finds out **how much information the patient requires** and **gives the appropriate amount of information.**
22	Provides **information in a patient-centered way** and shares it with the patient's consent (e.g. colleagues, family and others.)
23	Knows about the importance of **supplementing verbal information** with diagrams, models, written information and instructions and applies the information appropriately.

Reasoning and decision-making: *The student considers the extent to which individuals are involved and responsible in the reasoning and decision-making process*

24	Ascertains **how much involvement and responsibility the patient** is willing and able to take for decision-making.
25	Encourages **active participation by** the patient **in decision-making** and **explains choices or rights** to the patient in a patient-centered manner.
26	Clarifies **own role in decision-making** process.
27	Inquires about the **relevant psychological and social resources** the patient has available for making a decision.
28	Offers the patient the option to **include other people in the decision- making process** and clarifies with the patient how and when a decision must be made.
29	Discusses with the patient the likely **advantages, disadvantages and expected outcomes**
30	Discusses with patient the spectrum of possible **consequences of a decision** and explains to the patient the likely **consequences of not choosing diagnostic and therapeutic measures.**
31	Identifies **own opinion** clearly to the patient if asked.
32	**Discusses decisions** with colleagues, patients and their relatives as appropriate and regularly **reassesses own decisions** and revises them if necessary.

Uncertainty: *The student respects uncertainty as an integral part of reasoning and decision-making*

33	Explains to the patient which **information is needed to minimize uncertainty** in the decision-making process.
34	**Talks openly** to the patient about uncertainty and **formulates ways of dealing** with it.

B. Intra- and interpersonal communication (Professionalism and Reflection)

Communication and reflection with self and others: *The student consistently develops and improves self-awareness, self-reflection, self-care and reflects with others on own communication and behaviour*

1	**Recognises own emotions** (e.g. insecurity, sympathy/antipathy, attraction) in relation to others (e.g. patients, colleagues) and is able to **work efficiently despite own emotional reactions** when the situation requires to do so (e.g. degree of suffering of the patient, demanding patient).
2	Identifies, reflects and communicates **own strengths, weaknesses, limitations** and assesses **own wishes, fears, goals, norms and values.**
3	Describes and **assesses own communication and behaviour critically** considering alternatives in both.
4	Assesses **own stereotypes and social prejudices** and is aware that own actions are influenced by personal experience, the current situation, own knowledge and interests.
5	Reflects on **own attitude towards work** (e.g. cynicism, satisfaction).
6	Uses authority and **influence responsibly.**
7	Analyses and **discusses conversational situations with others** (metacommunication in e.g. peer reflexion, team conferences, Balint groups).
8	Reflects and discusses **ethical, inter-cultural and other challenges** in own actions as a health care professional (e.g. patient unable to give consent, health/illness concepts in different cultures, translators) and discusses approaches for resolution.

9	Recognizes that effective communication with patients can **foster patients´ satisfaction and improved clinical outcomes**.
10	Knows about **models of the health care professional–patient relationship** (e.g. transference/counter transference, reciprocity, inter-subjectivity, expectation/experience, potential imbalance of hierarchy).

Dealing with errors and uncertainty: *The student addresses errors and respects uncertainty as an integral part of reasoning and decision-making*

11	**Addresses own and others errors appropriately** (e.g. refrains from personally allocating blame) in order to seek for solutions and assistance and knows about basic principles in the development of errors (e.g. neglecting information or patient´s needs, inadequate communication).
12	Addresses and **deals with own uncertainty** appropriate to own level of education.

C. Communication in health care teams (Professional communication)

Teamwork and professional communication: *The student shows ability to communicate effectively in multi-professional teams*

1	Takes on, clarifies and reflects on **own role and responsibilities in the team** (e.g. team vs. team-player, leader) and identifies the **role of own profession** in an inter-professional team.
2	Specifies and **appreciates own potential** with regard to the team and is **willing and able to work** with others.
3	Understands the **principles of team dynamics** and how factors both support and inhibit teamwork in practice**.**
4	Perceives and **respects individuality, subjective perception, different points of view** of team members and the **expertise** of the different health care professionals.
5	Contributes to a **positive working atmosphere** (e.g. supports and integrates team members, mentions the positive side of unpleasant aspects, values team-success).
6	Identifies **own interests** and distinguishes these from the team goals.
7	Reflects on the impact of own opinion **on others** and takes this into account.
8	Uses **feedback** rules (e.g. first-person-statements) and gives feedback to team-members appropriately.
9	Is able to solve conflicts and enables a **constructive negotiation** in a healthcare team.

Leadership: *The student shows basic competencies in leadership skills*

10	Gives **clear instructions**.
11	Ensures that **all relevant information is available**.
12	Facilitates the formation of opinions in the group and encourages and rewards team members to **voice differing opinions**.

Professional communication and management: *The student uses effective and efficient communication and management strategies*

13	**Presents** expert knowledge **effectively** (e.g. presenting a patient and clinical details to others, speaking in front of a group, presenting scientific data).
14	Maintains **clear, appropriate records** (written or electronic) of clinical encounters and plans.
15	Identifies and is knowledgeable of **how to refer** to people/ institutions/ agencies that can help to solve problems appropriate to the situation.

* **ranking of objectives: 1 =** most important; **2 =** very important; **3 =** important **; 4 =** rather unimportant; **5 =** unimportant
* *Definition of acceptance:** % of participants who rated objectives as most important, very important or important (e.g. 100% acceptance means that all participants rated the objective in one of the three categories)