

Introduction to GITCS©

- Reflect on a specific health communication interaction.
- The following 28-item scale was developed to assess patientprovider communication during an interaction.
- There are six areas:
 - Setting the Stage
 - Building Trust
 - Active Communication
 - Communication Skills
 - Patient-Centred
 - Potential Barriers



Link to Manuscript Campbell & Aredes, 2019



UBC

Descriptors for the scale

For each behavior listed identify your response in the interaction using the following descriptors:

Descriptor Rubric:

- **Never** do not see the behavior described and expected for the interaction observed
- **Rarely** happens once but not again (if appropriate/required) (e.g. introduction may happen once and be considered "always", listens and answers questions may happen 1 out of 5 times)
- **Sometimes** happens more than once but not consistently (example: expect explanation of actions each time, and happens 2 out of 5 times)
- **Usually** happens most of the time (example: expect verification of comprehension each time teaching is done, and happens 3 out of 5 times)
- **Always** consistently does the behavior as expected
- **Not applicable** behavior not expected for interaction observed (example: does not ask permission to touch because is 2not doing any procedures)s 2



Consider an interaction

- Consider a recent interaction with a patient. Take a minute to write it out consider as many details as possible.
- How was your day going so far, were you distracted, what did you know about the patient, e.g. first time visit; how long did you have with the patient – did you get to look at the chart, get report?
- Walk into the room did you introduce yourself, set the stage for the interaction?
- What was the balance of verbal/nonverbal interaction?
- What was the time spent on physical/psychological/SDH/other areas?

GITCS	GLOBAL INTERPROFESSIONAL THERAPEUTIC COMMUNICATION SCALE		Never	Rarely	Sometimes	Usually	Always	
	1	Provides a professional greeting given the context	1	2	3	4	5	NA
	2	Introduces self by name and title without prompting	1	2	3	4	5	NA
	3	Conducts the communication in a culturally safe manner	1	2	3	4	5	NA
Setting the	4	Purposefully explains mutually established goals for the visit	1	2	3	4	5	NA
stage	5	Demonstrates appropriate proximity to the patient or family according to culture and context	1	2	3	4	5	NA
	6	Where possible provides for privacy and minimal interruptions during interaction	1	2	3	4	5	NA

Duilding truct	7	Verbalizes interest in patient and their perspective, encouraging rapport	1	2	3	4	5	NA
Building trust	8	Demonstrates knowledge about patient's case or situation	1	2	3	4	5	NA
	9	Encourages feedback and input from patient	1	2	3	4	5	NA

	10	Provides accurate information to the patient at the level they understand	1	2	3	4	5	NA
	11	Verifies comprehension (patient understands information)	1	2	3	4	5	NA
Active	12	Explains differently if necessary according to the patient's feedback	1	2	3	4	5	NA
communication	13	Uses questions in a balanced way, avoiding patient's passive participation (e.g. only responding to questions)	1	2	3	4	5	NA
	14	Offers patient opportunities to organize and express their thoughts about the messages	1	2	3	4	5	NA
	15	Listens attentively and answers questions	1	2	3	4	5	NA

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	16	Recognizes and responds to patient's nonverbal reactions	1	2	3	4	5	NA
	17	Speaks in an appropriate tone and volume given the situation	1	2	3	4	5	NA
	18	Sits or remains level with the patient when possible given the context	1	2	3	4	5	NA
Communication skills	19	Maintains contact appropriate to the culture when talking with the patient and/or family (e.g. eye contact, distance, spatial approximation)	1	2	3	4	5	NA
	20	Describes what they are going to do BEFORE doing it	1	2	3	4	5	NA
	21	Asks permission to touch BEFORE doing anything to the patient (e.g. blood pressure, dressing, palpation)	1	2	3	4	5	NA
	22	Touches the patient in a culturally respectful manner	1	2	3	4	5	NA

	23	Seeks input from the patient regarding their feelings and goals	1	2	3	4	5	NA
Patient- centered	24	Provides balanced time on psychosocial and clinical aspects of patient care depending on the context	1	2	3	4	5	NA
Centered	25	Identifies potential conflict and finds opportunities to gather information to minimize or manage it	1	2	3	4	5	NA

	26	Gives advice rather than explain options and alternatives	5	4	3	2	1	NA
Potential	27	Gives unsupported (false) reassurance	5	4	3	2	1	NA
barriers	28	Infers falsely, jumps to conclusions related to patient's behaviors.	5	4	3	2	1	NA

(1) Never: does not happen while is expected

(2) Rarely: happens once while always expected (1 out of 5 times)

(3) Sometimes: happens more than once but not consistently (2 out of 5 times)

(4) Usually: happens most of the time (3 out of 5 times)

(5) Always: consistently does the behavior as expected

(NA) Not applicable: behavior not expected

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0	1	2	3	4	5	6	7	8	9	10

Non-therapeutic communication

Therapeutic Communication

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0	1	2	3	4	5	6	7	8	9	10

Easy to use



Fill in the survey

- Now, take a few minutes to examine the questionnaire use link/ QR code below – Consider the interaction and identify the behaviors you did, always, sometimes, never? Did you:
 - Set the stage
 - Build Trust
 - Use Active Communication
 - Identify Communication Skills
 - Were you patient-centred
 - Any Potential barriers

*Link to 28-item scale: https://www.researchgate.net/publication/331535581 GITCSC 28-item Scale







Thanks for you feedback!

- You can download a copy of your completed survey for your own reference.
- Use as a check-in overtime to see how you are improving.
- Peer check one another observing interactions.

With thanks for your participation!

Any questions please contact PI – Dr. Suzanne H. Campbell

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