



**EUROSPINE DIPLOMA IN
INTERPROFESSIONAL SPINE CARE (EDISC)
MODULE 3 (CORE SKILLS 3):
**COMMUNICATION AND CONSULTATION
SKILLS**
3 July 2019
FINAL PROGRAMME**

QUICK FACTS

WHEN:	3 July 2019
WHERE:	Geneva, Switzerland University Medical Centre – CMU (Centre médical universitaire) Rue Michel-Servet 1 1206 Geneva SWITZERLAND +41 22 379 15 15 https://www.unige.ch/presse/plans/cmu/
MAXIMUM ATTENDEES:	30 delegates
REGISTRATION FEE:	EUROSPINE Member: €200 Non-member: €300
CME CREDITS:	Accredited by EACCME® (European Accreditation Council for Continuing Medical Education) for 6 ECMEC®s
LANGUAGE:	English
DRESS:	Casual
IMPORTANT NOTE:	Attendance at every session is mandatory. This will be a paperless course and no printed programme will be provided. A wireless Internet device (mobile phone for the app and minimum of tablet/laptop for support documentation) will be necessary to access on-line resources during the course and for completing the course evaluation. Please bring one with you. The course evaluation is mandatory to obtain the CME certificate.

TARGET AUDIENCE

Healthcare professionals in Europe in order of availability and access: Primary Care Physicians and Surgeons, Physiotherapy, Chiropractors, Osteopaths, Naprapath and others who are graduated as clinicians from a recognized institution (i.e. professional school or university).

At least two years of clinical experience is recommended but all new graduates are encouraged to register.

AIMS OF THE MODULE

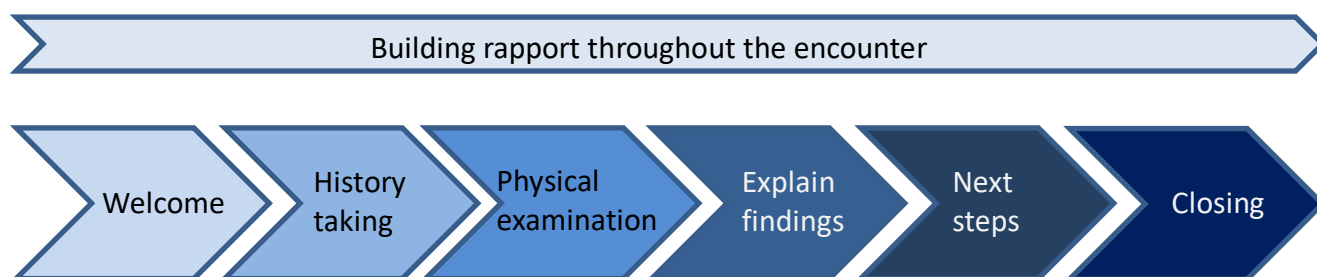
The aim of this module is to enhance skills in communication and develop an awareness of psychologically-informed practice for use in consultations with patients presenting with spinal pain. The content will be underpinned by research evidence and best practice.

LEARNING OUTCOMES

Upon successful completion of this module, learners will be able to:

1. Identify their preferred question styles (including opening questions) in a clinical consultation
2. Recognise overlaps and interruptions during history-taking
3. Understand and deliver active listening skills in the consultation
4. Be able to explain to a patient the role of psychology in spine care
5. Identify the components of cognitive and affective reassurance
6. Articulate strategies to promote positive behaviour change in patients with spine pain

Coherence of the module:



How do I build rapport in a consultation?	Learning outcome 1, 2 & 3
↓	
How can I get the best information from the patient during history taking?	1, 2 & 3
↓	
How can I use communication skills to make the consultation person centered?	1, 2 & 3
↓	
How can I adopt a psychologically informed approach to my clinical practice?	4
↓	
How can I reassure a patient (and their partner, family etc) when appropriate?	5
↓	
What strategies am I going to use to promote positive behaviour change?	6

INSTRUCTIONAL METHODS

Pre-learning & e-learning activities:

- Preparatory reading: See list [outcomes 1, 2, 5]
- Watch 2 short presentations (8 minutes each): Psychology in People with Pain - Why it Matters: Part 1 (<https://www.youtube.com/watch?v=N7vRyCW2XS0>) and Part 2 (<https://www.youtube.com/watch?v=PY4R19Rm94I>) [outcomes 4 and 5]
- Classroom teaching: Interactive lectures [outcomes 1 - 6]
- Facilitated group discussions based on research examples [outcomes 1- 6]

ASSESSMENT

The methodological approach we shall be using for this is under review and is subject to further development.

COURSE EVALUATION BY THE PARTICIPANTS

In line with EACCME's requirements for accredited activities, participants will be requested to complete a mandatory course evaluation at the end of the module in the form of a short online survey. Responding to the survey is a condition in order for participants to obtain their CME certificates

LIST OF RESOURCES

MINIMUM REQUIREMENT

- Pincus T, Holt N, Vogel S, Underwood M, Savage R, Walsh DA, Taylor SJ. Cognitive and affective reassurance and patient outcomes in primary care: a systematic review. *Pain* 2013 Nov;154(11):2407-16. DOI: 10.1016/j.pain.2013.07.019
- Keefe FJ, Main CJ, George SZ. Advancing psychologically informed practice for patients with persistent musculoskeletal pain: promise, pitfalls, and solutions. *Physical Therapy* 2018;98:398–407. DOI: 10.1093/ptj/pzy024

SUPPLEMENTARY

- Emily C Chester, Natalie C Robinson, Lisa C Roberts. Opening clinical encounters in an adult musculoskeletal setting. *Manual Therapy* 2014;19:306-10.
- Presentations (8 minutes): Psychology in People with Pain - Why it Matters: Part 1 <https://www.youtube.com/watch?v=N7vRyCW2XS0>
- Patient video?

EXTENDED LEVEL

- Roberts LC, Burrow FA. Interruption and rapport disruption: measuring the prevalence and nature of verbal 'interruptions' during back pain consultations. Journal of Communication in Healthcare. 2018
<https://doi.org/10.1080/17538068.2018.1449289>
- Presentations (8 minutes): Psychology in People with Pain - Why it Matters: Part 2 (<https://www.youtube.com/watch?v=PY4R19Rm94I>)

COURSE CHAIRS

LISA ROBERTS	PHYSIOTHERAPIST, SOUTHAMPTON, UNITED KINGDOM
STEVEN VOGEL	OSTEOPATH, LONDON, UNITED KINGDOM
CHRISTINE CEDRASCHI	PSYCHOLOGIST, GENEVA, SWITZERLAND

FACULTY

PAULO PEREIRA	NEUROSURGEON, PORTO, PORTUGAL
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SCIENTIFIC PROGRAMME COMMUNICATION AND CONSULTATION SKILLS

WEDNESDAY, 3 JULY 2019

COURSE ATTENDANCE IS MANDATORY

TIME	TOPIC	FACULTY
07:30 - 08:00	Participants' check-in and welcome	
08:00 - 08:15	Course Introduction and expectations	Lisa Roberts
SESSION 1: OPENING ENCOUNTERS		
08:15 - 08:30	Lecture: Meeting & greeting. Small talk	Lisa Roberts
08:30 - 09:00	Demonstration (role play) and group discussion	& Steven Vogel
09:00 - 09:20	Lecture: Opening questions and interruptions	Lisa Roberts
09:20 - 10:10	Group task: Identifying preferred opening questions	All
10:10 - 10:30	Group reflection on the use of minimising language	Lisa Roberts
Coffee Break 30 min		
SESSION 2: ACTIVE LISTENING		
11:00 - 11:15	Lecture: Person-centered communication	Steven Vogel
11:15 - 12:15	Practice task: Plenary group role play and discussion – active listening and picking up on cues	All
12:15 - 12:30	Group reflection, implementation planning – opportunities and obstacles	Steven Vogel
Lunch Break 60 min		
SESSION 3: INTRODUCING PSYCHOLOGICALLY INFORMED PRACTICE		
13:30 - 13:45	Lecture: Why is psychology important?	Christine Cedraschi
13:45 - 14:15	Small group task: How to introduce psychology to patients with plenary discussion	
14:15 - 14:35	Lecture: Reassurance	Steven Vogel
14:35 - 15:15	Open panel discussion – appropriate reassurance for people with spinal pain	All
Coffee Break 20 min		
SESSION 4: ENCOURAGING POSITIVE BEHAVIOR CHANGE		
15:35 – 15:55	Lecture: Encouraging behaviour change along the continuum of spine care	Paulo Pereira
15:55 – 16:30	Practice task (in pairs): Increasing engagement in exercise or activity	All
16:30 – 16:45	Key take home messages	Christine Cedraschi
16:45 – 17:00	Course evaluation (Mandatory for all participants)	All participants
17:00	END OF MODULE	



**EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)
EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)**

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<https://eaccme.uems.eu> - accreditation@uems.eu

EUROSPINE, the Spine Society of Europe
Operngasse 20b
1040 Vienna
Austria

Brussels, 06/06/2019

Dear Ms Wagner

Subject : EACCME® Accreditation of event reference #LEE19-00252

We are pleased to inform you that your application for EACCME® accreditation of

EUROSPINE Education Week 2019: EDISC Module 3 - Communication And Consultation Skills, Geneva, Switzerland, 03/07/2019-03/07/2019

has been granted **6** European CME credits (ECMEC®s) by the European Accreditation Council for Continuing Medical Education (EACCME®).

Accreditation Statement

Accreditation by the EACCME® confers the right to place the following statement in all communication materials including the event website, the event programme and the certificate of attendance. The following statements must be used without revision:

"The EUROSPINE Education Week 2019: EDISC Module 3 - Communication And Consultation Skills, Geneva, Switzerland, 03/07/2019-03/07/2019 has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME®) with **6** European CME credits (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity."

"Through an agreement between the Union Européenne des Médecins Spécialistes and the American Medical Association, physicians may convert EACCME® credits to an equivalent number of *AMA PRA Category 1 Credits™*. Information on the process to convert EACCME® credit to AMA credit can be found at www.ama-assn.org/education/earn-credit-participation-international-activities.

"Live educational activities, occurring outside of Canada, recognised by the UEMS-EACCME® for ECMEC®s are deemed to be Accredited Group Learning Activities (Section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada."

EACCME® credits

**UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS**

Association internationale sans but lucratif – International non-profit organisation

Each participant can only receive the number of credits he/she is entitled to according to his/her actual participation at the event once he/she has completed the feedback form. Cf. criteria 9 and 23 of UEMS 2016.20.

In order to help you issue individual certificates to each participants, please find below the breakdown of ECMEC*s per day:

03.07.2019 - 6.00

The EACCME* awards ECMEC*s on the basis of 1 ECMEC* for one hour of CME with a maximum of 8 ECMEC*s per day. Cf. Chapter X of UEMS 2016.20.

Logo

The UEMS-EACCME* logo is a service mark of the European Union of Medical Specialists – European Accreditation Council for CME. Only after confirmation of accreditation has been received can the Provider use the UEMS-EACCME* logo on material related to the LEE. The logo may only be used in conjunction with, and in proximity to, the EACCME* accreditation statement and must not be associated with any commercial logo. The logo cannot be used in notices, advertising, or promotion of activities other than in association with the EACCME* accreditation statement.

Feedback report

Based on the participants' individual feedback, the provider must submit an event report to the EACCME* within four weeks of the completion of the event. This report must include the participants' feedback, information on the total number of participants and any perception of bias by participants. Failure to provide feedback could jeopardise recognition of any future applications.

Final programme

The EACCME* also requires you to send by post a copy of the final printed programme brochure/book.

The UEMS-EACCME Secretariat



CONTACTS

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COURSE ORGANISATION

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SCIENTIFIC CONTENT

Prof. Lisa Roberts, Mr Steven Vogel & Dr Christine Cedraschi

Course Chairs

Prof. Margareta Nordin & Prof. Pierre Côté

Co-chairs, Non-surgical Diploma Task Force

Prof. Bernhard Meyer

Chairman, Education Committee of EUROSPINE