# TIME AND TALK: STRUCTURING PATIENT-CENTERED COMMUNICATION

### GROUP ACTIVITIES 1/3

Group exercises and role-plays are central to the Time and Talk experiential method. Group activities allow participants to learn from each other's resources, skills and experience.

To ensure a positive learning experience for all participants, a collaborative learning environment needs to be created. This can be done by ensuring that the role-players are not always at the center of attention. All participants in the exercise should be given an opportunity to contribute by offering input and suggestions and by acting out those suggestions.

Below are suggestions for group activities that can help create a collaborative learning experience. You will also find instructions for how to do them.

### HOT SEATING

**Description:** Build a patient profile by having observers ask questions of the person who will play the patient. Questions could include age, work situation, feelings about their life with hearing loss, family relations, or how they spend their free time.

When to use it: Hot-seating can be used to cover the initial phases of a consultation quickly so that participants can move on to other areas. It can also be used to change the pace of a session if a particular role-play scenario is becoming repetitive. It may also be useful if there is a need to explore the patient's ideas, concerns, feeling and expectations.

**Purpose:** Hot-seating is a way to involve all learners in a session from the start. It provides the entire group with an opportunity to practice their interview skills. This makes for a more interesting and realistic character sketch and can be quite lighthearted.

### ALTER EGO

**Description:** During the role-play, a participant is asked to come to the front and put a hand on the shoulder of the person playing the clinician or the patient. He/she will be asked to say out loud, using the first person pronoun, what he/she really thinks or feels but is not saying. For example, the clinician may think: "I am really worried about how I am going to break this piece of bad news. I fear that the patient will get really upset. How can I possibly break it in a gentle manner?" This approach can be used for any person in the role-play. The method can be further developed by asking the alter egos of both participants to speak to each other using their "honest" voices.



# GROUP ACTIVITIES 2/3

When to use it: If the role-players get stuck or are unsure about how to handle a particular situation, this group activity may be effective. It may also be useful if you want to bring in other members of the group to highlight a learning point which is not overt or explicit.

**Purpose:** The Alter Ego helps participants understand what may be going on in the heads of the clinician and the patient as the conversation unfolds. This new understanding of each character's "train of thought" enables them to take appropriate next steps in the conversation. It may also reveal any "hidden" agendas under the surface.

#### LIFE LINE

**Description:** The role-players can pause at any time to ask the audience for a suggestion on what to do next. The audience can encourage the role-players to continue as they were doing or suggest that they take a completely new direction.

When to use it: If the role-players are uncertain about how to respond in a certain situation or lack confidence to continue, asking the group can be a useful way to gain new inspiration or regain the courage to keep going.

**Purpose:** This activity allows the role-players to take a break and seek help from their peers. It also provides the group an active role and a stake in the further development of the scenario. This contributes to a healthy collaborative learning environment.

#### **REALITY CHECK**

**Description:** Ask observers: "If you were the patient, what would you tell your partner or spouse about the appointment today?" or ask the role-players: "At this point, how would you describe what has happened so far to a close friend or someone at home?"

When to use it: At the end of a role-play, or if the role-players get stuck.

**Purpose:** By asking participants to answer this question, they are stimulated to reflect on the content, quality and outcome of the conversation they had with the patient and on what the patient's experience might have been. By changing the context, a different perspective may emerge.

#### MATCHING GAME

**Description:** Participants review the list of Competency Skills and develop a question that they would ask a patient based on a particular skill, e.g. finding out why the patient has really come to the appointment.



# GROUP ACTIVITIES 3/3

When to use it: At the end of the session when participants are ready to reflect on their practice.

**Purpose:** Enables participants to become familiar with a structure for their consultations, e.g., a beginning, middle and end.

#### ENGAGE OBSERVERS

To involve the whole group and maximize the learning outcome of the session, you can give observers a task to complete while they are watching the role-play. For example, you can ask observers to identify and call out different aspects during the role-play:

- Body language (non-verbal communication)
- Tone of voice: This can be done by asking the role-players to turn their backs on the group, so that the group concentrates on the voice and disregards other expressions
- Focus on the agenda established by the role-players at the outset, e.g., practicing being assertive or dealing with a difficult patient who talks too much
- Looking out for open-ended or closed questions used by the clinician
- Picking up cues, e.g., a patient who mentions a worry that they constantly refer to, but do not speak about in reference to their hearing loss

