

# Patient Centered Observation Form: MA/Nurse

Trainee name \_\_\_\_\_ Observer \_\_\_\_\_ Obsrvn# \_\_\_\_\_ Date \_\_\_\_\_

Directions: *Directions; Track behaviors in left column. Then, mark one box per row: a, b or c. Competent skill use is in one of the right two columns. Record important MA/ Nurse or patient comments and verbal / non-verbal cues in the notes. Use form to enhance your learning, vocabulary, and self-awareness. Ratings can be for individual interviews or to summarize several interactions. If requested, use this form to guide verbal feedback to someone you observe.*

Element	MA/Nurse Centered Biomedical Focus	Patient Centered Biopsychosocial Focus
<b>Establishes Rapport</b> <input type="checkbox"/> Introduces self <input type="checkbox"/> Warm greeting <input type="checkbox"/> Acknowledges all in the room by name <input type="checkbox"/> Uses eye contact <input type="checkbox"/> Humor or non medical interaction	<input type="checkbox"/> 1a. Uses 0-2 elements	<input type="checkbox"/> 1b. Uses 3 elements
	<input type="checkbox"/> 1c. Uses ≥ 4 elements	
<b>Maintaining Relationship Through the Interaction</b> <input type="checkbox"/> Uses verbal or non-verbal empathy, including during vitals <input type="checkbox"/> Listens well using continuer phrases (“um hmm”) <input type="checkbox"/> Paraphrases important verbal content; <input type="checkbox"/> <i>Demonstrates mindfulness through curiosity, intent focus, not seeming “rushed” or by acknowledging distractions</i>	<input type="checkbox"/> 2a. Uses 0-1 elements	<input type="checkbox"/> 2b. Uses 2 elements
	<input type="checkbox"/> 2c. Uses 3 or more elements	
<b>Collaborative upfront agenda setting</b> <input type="checkbox"/> Additional elicitation- “something else?”- each elicitation counts as a new element <input type="checkbox"/> Acknowledges agenda items from other team member (eg receptionist), from form, or from EMR. <input type="checkbox"/> Confirms what is most important to patient?	<input type="checkbox"/> 3a. Uses 0-1 elements	<input type="checkbox"/> 3b. Uses 2 elements
	<b>NAME THE PROBLEMS RAISED BY PATIENT OR MA/Nurse:</b>	
<b>Maintains Efficiency through transparent (out loud) thinking:</b> <input type="checkbox"/> <i>about visit MA/Nurse time use</i> <input type="checkbox"/> <i>about entire visit organization</i> <input type="checkbox"/> <i>about problem solving strategies</i> Notes:	<input type="checkbox"/> 4a. Uses 0 elements	<input type="checkbox"/> 4b. Uses 1 element
	<input type="checkbox"/> 4c. Uses 2 or more elements	
<b>Basics: Vitals, Checks Meds and Paperwork</b> <input type="checkbox"/> Prepares patient and shares vital findings ≥ 2 times <input type="checkbox"/> Asks about paperwork <input type="checkbox"/> Asks about refills	<input type="checkbox"/> 5a. Uses 0-1 elements	<input type="checkbox"/> 5b. Uses 2 elements
	<input type="checkbox"/> 5c. Uses 3 elements	
<b>Patient Activation and Engagement (encourages pt to bring up important issues) ____ # of clues</b> <input type="checkbox"/> Explores patient verbal cue about psychosocial or physical concern <input type="checkbox"/> Explores patient non-verbal cue about underlying concern <input type="checkbox"/> Asks if patient has questions <input type="checkbox"/> Encourages patient to address concerns with provider <input type="checkbox"/> Explores contextual influences: family, cultural, spiritual	<input type="checkbox"/> 6a. Uses 0-1 elements	<input type="checkbox"/> 6b. Uses 2 elements
	<input type="checkbox"/> 6c. Uses ≥ 3 elements	

# Patient Centered Observation Form:

## MA/Nurse

Trainee name \_\_\_\_\_

Observer \_\_\_\_\_

Obsrvn# \_\_\_\_\_

Date \_\_\_\_\_

Element	MA/Nurse Centered Biomedical Focus	←————→	Patient Centered Biopsychosocial Focus
<b>Electronic Medical Record Use</b> <input type="checkbox"/> Regularly describes use of EMR to patient <input type="checkbox"/> Maintains eye contact with patient during majority of time while using EMR. <input type="checkbox"/> Positions monitor to be viewed by patient <input type="checkbox"/> Points to screen	<input type="checkbox"/> 7a. Uses 0 or 1 elements.	<input type="checkbox"/> 7b. Uses 2 elements	<input type="checkbox"/> 7c. Uses 3 or 4 elements
<b>Gathering Information</b> <input type="checkbox"/> Collects focused history per problem X____ <input type="checkbox"/> Uses reflecting statement X____ <input type="checkbox"/> Uses summary/clarifying statement X____ <u>Count each time the skill is used as one element</u>	<input type="checkbox"/> 8a. Uses 0 elements	<input type="checkbox"/> 8b. Uses 1-2 elements	<input type="checkbox"/> 8c. Uses 3 or more elements
Notes:			
<b>Self management support: Goal setting and action plan development</b> NOT PRESENT IN EVERY INTERVIEW <input type="checkbox"/> Asks if patient wants to create a health goal <input type="checkbox"/> Asks patient to brainstorm activities to reach goal <input type="checkbox"/> Asks patient to chose one activity <input type="checkbox"/> Asks patient to name activity frequency <input type="checkbox"/> Asks patient to identify time for activity <input type="checkbox"/> Assesses patient confidence (1 through 10) <input type="checkbox"/> Assesses patient barriers	<input type="checkbox"/> 9a. Uses 0-2 elements.	<input type="checkbox"/> 9b. Uses 3-5 elements	<input type="checkbox"/> 9c. Uses ≥ 6 elements
<b>Self management Follow-up: Checking on progress, revision</b> <input type="checkbox"/> Assesses progress on prior goals <input type="checkbox"/> Problem solves with patient to revise action plan <input type="checkbox"/> Celebrates patient successes <input type="checkbox"/> "Normalizes" struggles with self management <input type="checkbox"/> Ask about including action plan in today's agenda	<input type="checkbox"/> 10a. Uses 0-1 elements	<input type="checkbox"/> 10b. Uses 1-3 elements	<input type="checkbox"/> 10c. Use ≥ 4 elements
<b>Closure</b> <b>Follow-up and System Navigation</b> <input type="checkbox"/> Asks for questions about today's topics. <input type="checkbox"/> Assesses patient comfort with system navigation <input type="checkbox"/> Provides system navigation aid <input type="checkbox"/> Uses Teachback. = Asking the patient to explain his/her understanding of the plan <input type="checkbox"/> Prints After Visit Summary <input type="checkbox"/> Combines Teachback and AVS creation while sharing the screen. (Counts for 3 elements)	<input type="checkbox"/> 11a. Uses 0-1 elements	<input type="checkbox"/> 11.b Uses 2-3 elements	<input type="checkbox"/> 11c. Use ≥ 4 elements