



FAQs: Faculty-in-Training Program

What does the FIT program offer you as a participant?

- A learner-centered professional development experience where you can set your own personal learning goals
- A faculty mentor (“Guide”) who will help you achieve your personal goals and with whom you can confide in and seek council during the program and beyond
- A learning community of peers who will provide you with support and with whom you will develop your teamwork skills
- Development of advanced communication skills:
 - Facilitation
 - Workshop content and development
 - Coaching
 - Personal Awareness
- Development of advanced personal awareness skills:
 - Leadership
 - Diversity
 - Teamwork
 - Conflict engagement
- The opportunity to learn from, to work alongside, and to develop professional relationships with experts in the field of healthcare communication

How is the FIT program unique?

- The FIT program uses the foundation of the skills developed in the Relationship-Centered Communication Facilitation (RCF) program and Train-the-Trainer (TTT) program, and takes them to a higher professional level to increase impact and to also deepen facilitation/leadership skills. This is via intense group work at a national level, the personalized faculty Guide who addresses their own learning goals at the FIT’s home institution, and focus on reflection and personal awareness.
- FITs develop, practice and receive active feedback as they co-facilitate workshops and small groups with seasoned ACH faculty.

What is the training process?

- The program typically takes 2 years to complete (i.e. all EPAs have been signed off on)
- FIT Training Events:
 - Winter Course (winter; FIT attends at least twice during tenure in program): Intensive skills practice for fundamental communication and facilitation
 - ENRICH Course (summer; FIT attends at least one during tenure in program): Co-facilitation in communication skills workshops and further training in advanced facilitation scenarios
 - FIT-FAB (fall; FIT attends at least one during tenure in program): “FIT FAB” stands for FIT Facilitating and Beyond. Helps FITs develop skills in the Personal Awareness competency area and serves as a place to practice facilitation.
- Phone check-ins with faculty Guide (approximately monthly)
- Annual portfolio review of progress

How does participation in the FIT program benefit your institution?

- Adds value to the organization in the form of coaching trainees and faculty in communication skills (both on a remedial basis and on an aspirational basis)
- Supports the efforts of the institution including those committed to improve patient experiences, provider/staff engagement, patient safety, training/development, organizational culture, and more!
- Fosters the development of communication curricula as well as content (such as behavior change counseling, difficult or challenging interactions, managing conflict, etc.) This can be applied to patient interactions as well as interactions within or between teams
- Provides workshop development on communication & professionalism topics, teaching of which is required by ACGME
- Increases the effectiveness of small group facilitation, which is the wave of the future for medical teaching
- Increases patient satisfaction scores related to communication with patients

How does communication impact my institution?

1. **Influence CAHPS and Patient Experience:** Research consistently proves that communication skills are one of the primary factors influencing patient experience outcomes.
 - a. Survey questions include:
 - i. Did your doctor/nurse listen to you?
 - ii. Did your doctor/nurse explain things in a way you could understand?
 - iii. Did your doctor/nurse treat you with courtesy and respect?
 - b. The fundamental skills taught by ACH facilitators directly relate to these core domains.
 - c. The investment of time and funding to become ACH faculty is quickly recovered by enhancing patient and provider/staff experiences (e.g., CMS reimbursement is directly tied to communication and relationships via the CAHPS program; your institution can't afford NOT to invest in a program like FIT).
2. **Improve patient health outcomes:** Numerous studies, across multiple health conditions and patient populations have found a direct positive correlation between patient outcomes and communication/relationships between providers and patients.
 - a. For example, communication improves:
 - i. Diabetes management
 - ii. Pain management
 - iii. Obesity/weight loss
 - iv. Tobacco and substance abuse
 - v. Adherence to medications
 - vi. More
3. **Support organizational culture and staff engagement:** Research indicates that communication skills programs lead to important improvements for organizations and the staff, providers, and leadership teams.
 - a. For example:
 - i. Turnover among staff is reduced
 - ii. Malpractice claims are decreased
 - iii. Staff and provider engagement improves
 - iv. Teamwork is enhanced
 - v. Job satisfaction improves
 - vi. Patient experience/satisfaction scores improve
 - vii. Patient complaints decrease