The proposed teaching and assessment methodology that appear in the guide may be subject to changes as a result of the restrictions to face-to-face class attendance imposed by the health authorities.

**Contact**

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**Use of Languages**

Principal working language: catalan (cat)  
Some groups entirely in English: No  
Some groups entirely in Catalan: Yes  
Some groups entirely in Spanish: No

**Teachers**

Rafael Azagra Ledesma  
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Lucas Mengual Martinez  
Jose Maria Bosch Fontcuberta  
Judit Llussa Arboix  
Maria Asuncion Wilke Trinxant  
Maria Antonia Llauger Rossello  
Jose Miguel Llovet Lombarte  
Montserrat Bare Mañas  
Miriam Mulero Collantes  
Raquel Gayarre Aguado  
Anastasia Ivanova  
Ariadna Mas Casals
Prerequisites

Objectives and Contextualisation

- to notice the importance of behaviors, psychological states, beliefs, expectations, desires and attitudes in the health-disease process,
- to become aware of the relevance of doctor's communication skills for relating to patients and relatives,
- to know the major role of patients' and health professionals' nonverbal behavior in primary care, and
- to develop observational and emotional expression capabilities in simulated and real clinical contexts.

Competences

- Be able to work in an international context.
- Communicate clearly, orally and in writing, with other professionals and the media.
- Critically assess and use clinical and biomedical information sources to obtain, organise, interpret and present information on science and health.
- Demonstrate knowledge of the national and international health organisations and the factors and circumstances affecting other healthcare systems.
- Empathise and establish efficient interpersonal communication with patients, family-members, accompanying persons, doctors and other healthcare professionals.
- Engage in professional practice with respect for patients' autonomy, beliefs and culture, and for other healthcare professionals, showing an aptitude for teamwork.
- Listen carefully, obtain and synthesise relevant information on patients' problems, and understand this information.
- Maintain and sharpen one's professional competence, in particular by independently learning new material and techniques and by focusing on quality.
- Recognise the role of complexity, uncertainty and probability in decision-making in medical practice.
- Use information and communication technologies in professional practice.

Learning Outcomes

1. Analyse the limitations to the interpretation of behaviour from non-verbal communication.
2. Apply the basic elements of bioethics (patients’ rights, doctors’ obligations).
3. Be able to work in an international context.
4. Communicate clearly, orally and in writing, with other professionals and the media.
5. Describe the communication process and its effect on the professional caregiver-patient relationship.
6. Detect emotions through non-verbal communication in a context of patient-health professional relationship.
7. Detect how verbal and non-verbal behaviour can be linked in a context of patient-health professional relationship.
8. Differentiate between risk to the population and individual risks.
9. Explain the elements to be considered when assessing patients’ role in decision-making on their health and on the medical attention they receive at their primary healthcare centres.
10. Identify the basic elements of the face-to-face doctor-patient interview in a context of high accessibility and longitudinal care.
11. Identify the different components of non-verbal communication in a context of patient-health professional relationship.
12. Identify the different professionals in the healthcare team, together with their profiles, functions and how they work together.
13. Identify the structure, organisation and resources of primary healthcare and the different components of primary healthcare teams.
14. Know the basic elements of the communication of clinical research results.
15. Maintain and sharpen one’s professional competence, in particular by independently learning new material and techniques and by focusing on quality.
16. Question a simple model to explain the state of health/illness of individuals.
17. Use information and communication technologies in professional practice.

Content

- The biopsychosocial model and the patient-centered interview.
- Items of negotiation and the motivational interview in medicine. The principle of autonomy.
- Interferences that influence the doctor / patient relationship in primary care.
- Nonverbal communication: concept and components.
- The expression and detection of emotions through nonverbal communication.
- The relationship between verbal and non-verbal communication.
- The role of nonverbal communication in the doctor / patient relationship.
- The nonverbal communication of healthcare professionals in a context of primary care.
- The factors that influence the interpretation of nonverbal communication in the doctor / patient relationship.

Methodology
### Activities

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<th>Title</th>
<th>Hours</th>
<th>ECTS</th>
<th>Learning Outcomes</th>
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<td>CLINICAL CARE PRACTICES</td>
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### Assessment

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### Assessment Activities

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<th>Weighting</th>
<th>Hours</th>
<th>ECTS</th>
<th>Learning Outcomes</th>
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<td>Attendance and active participation in specialized seminars and laboratory practices</td>
<td>16%</td>
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<td>Oral defense of written group work</td>
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### Bibliography

Specific bibliography:


Other references: