

**FORMAR PARA COMUNICAR EFICAZMENTE: ANÁLISE COMPARATIVA DOCUMENTAL DA OFERTA FORMATIVA PORTUGUESA**

**TRAINING TO COMMUNICATE EFFECTIVELY: DOCUMENTARY COMPARATIVE ANALYSIS OF THE PORTUGUESE TRAINING OFFER**

**ENSEÑAR A COMUNICAR EFICAZMENTE: ANÁLISIS DOCUMENTAL COMPARATIVO DE LA OFERTA FORMATIVA PORTUGUESA**

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## RESUMO

**Introdução:** A formação específica e adequada dos profissionais de saúde em comunicação clínica revela-se de extrema importância para uma boa relação comunicativa com o paciente.

**Objetivo:** Analisar formações pós-graduadas e profissionais em comunicação clínica ou competências de comunicação, destinadas a fisioterapeutas, existentes em Portugal, através de uma análise comparativa documental.

**Métodos:** Realizada pesquisa online, em diferentes sites de empresas de formação específica para fisioterapeutas e/ou profissionais de saúde, assim como nas páginas online das diferentes universidades e institutos politécnicos portugueses, com formação pós-graduada e profissional destinada a fisioterapeutas, e ainda nos sites da Associação Portuguesa de Fisioterapeutas e na Sociedade Portuguesa de Comunicação Clínica.

**Resultados:** A pesquisa permitiu identificar oito ofertas formativas na área da comunicação clínica destinadas a fisioterapeutas. Os cursos foram analisados e comparados relativamente à designação da formação, do seu regime, tipologia, destinatários, local de realização, data de realização, entidade formadora, habilitações do formador, carga horária, objetivos, conteúdos programáticos, tipo de avaliação, classificação e grau académico/profissional conferido (se aplicável). Todos os cursos são de carácter teórico-prático, com carga horária a variar entre oito e 100 horas, seis cursos presenciais e dois em formato online. Todos os cursos eram destinados a grupos de profissionais de saúde de diversas áreas, nenhum destinado especificamente a fisioterapeutas. Verificou-se bastante homogeneidade relativamente aos conteúdos programáticos e metodologias de ensino.

**Conclusão:** O estudo permitiu identificar e caracterizar a oferta formativa em comunicação clínica disponível em Portugal, destinados a fisioterapeutas, que permitem melhorar a relação de comunicação fisioterapeuta-utente. Permitiu ainda identificar as principais necessidades formativas neste contexto. A informação disponível revelou diversas convergências e divergências na oferta formativa identificada, contudo verificou-se que a metodologia de ensino foi de carácter expositivo teórico e prático com a visualização de vinhetas clínicas, atividades de role-play e entrevista com pacientes simulados, embora não tenha sido possível identificar a metodologia de avaliação dos cursos.

**Palavras-chave:** comunicação clínica; educação; formação; fisioterapeutas

## ABSTRACT

**Introduction:** Health professionals' specific and adequate training in clinical communication is of utmost importance for adequate communication with the patient.

**Objective:** To analyze postgraduate and professional training courses in clinical communication or communication skills, for physiotherapists, in Portugal through a documental comparative analysis.

**Methods:** Online research was conducted in training organizations for physiotherapists and/or health professionals and online pages of different universities and polytechnic institutes with postgraduate and professional training for physiotherapists.

**Results:** The search allowed the identification of eight training courses in clinical communication aimed at physiotherapists. The courses were analyzed and compared in training, recipients, hours, objectives, syllabus, teaching methodology, and assessment type. All courses are theoretical-practical, with a workload ranging from eight to 100 hours, six face-to-face courses, and two online. All programs were addressed to health professionals from different areas, and none specifically addressed physiotherapists. There was considerable homogeneity regarding syllabus content and teaching methodologies.

**Conclusion:** The study allowed identifying and characterizing the training courses in clinical communication available in Portugal, aimed at physiotherapists, which improves the physiotherapist-patient communication relationship. The teaching methodology was expository, theoretical, and practical, with the visualization of clinical vignettes, role-play activities, and interviews with simulated patients.

**Keywords:** clinical communication; education; training; physiotherapists

## RESUMEN

**Introducción:** La formación específica y adecuada de los profesionales sanitarios en comunicación clínica es sumamente importante para una buena relación comunicativa con el paciente.

**Objetivo:** Analizar la formación de postgrado y profesional en comunicación clínica/sanitaria o habilidades de comunicación para fisioterapeutas, existentes en Portugal, a través de un análisis comparativo de documentos.

**Métodos:** Realizó investigación en línea, en diferentes sitios de empresas de formación específica para fisioterapeutas y / o profesionales de la salud, así como en las páginas en línea de diferentes universidades e institutos politécnicos portugueses, con formación profesional y de posgrado dirigida a fisioterapeutas, así como en los sitios web de la Asociación Portuguesa de Fisioterapeutas y la Sociedad Portuguesa de Comunicación Clínica.

**Resultados:** La investigación permitió identificar ocho ofertas de capacitación en el área de comunicación clínica para fisioterapeutas. Los cursos fueron analizados y comparados en relación con la designación de la formación, su régimen, tipología, destinatarios, lugar de realización, fecha de realización, entidad formativa, cualificaciones del formador, carga de trabajo, objetivos, contenido programático, tipo de evaluación, clasificación y titulación académica/profesional conferida (en su caso).

Todos los cursos son teóricos y prácticos, con una carga de trabajo que oscila entre las ocho y las 100 horas, seis cursos presenciales y dos en formato online. Todos los cursos estaban dirigidos a grupos de profesionales de la salud de diversas áreas, ninguno dirigido específicamente a fisioterapeutas. Hubo una gran homogeneidad en cuanto a los contenidos programáticos y las metodologías de enseñanza.

**Conclusión:** El estudio permitió identificar y caracterizar la oferta formativa en comunicación clínica disponible en Portugal, dirigida a fisioterapeutas, que permite mejorar la relación de comunicación fisioterapeuta-usuario. También identificó las principales necesidades formativas en este contexto. La información disponible reveló varias convergencias y divergencias en la oferta formativa identificada, sin embargo se encontró que la metodología docente era de carácter expositivo teórico-práctico con la visualización de viñetas clínicas, actividades de role-play y entrevistas con pacientes simulados, aunque no fue posible identificar la metodología de evaluación de los cursos.

**Palabras Clave:** comunicación clínica; educación; capacitación; fisioterapeutas

## INTRODUCTION

Health professionals' continuous and adequate training is fundamental for clinical practice quality, ensuring that patients benefit from adequate and updated interventions according to their specific clinical condition (Denniston et al., 2017).

Therefore, the World Physiotherapy has developed a document entitled Physiotherapist Education Framework (World Physiotherapy, 2021) that aims to guide and establish the prerequisites for the training of physiotherapists from pregraduate training to continuing professional education. The continuous and professional training of physiotherapists should be promoted throughout their professional career, from their pregraduate training, and constantly updated (World Physiotherapy, 2021).

Throughout their career, physiotherapists must develop proficiency in patient assessment, activity/technique learning, in the technical application of procedures, as well as in the review and documentation/communication of interventions, both to the patients and to the other health professionals in the team, thus improving their knowledge and clinical reasoning (American Physical Therapy Association, 2013, 2015; World Physiotherapy, 2021). It is essential that the physiotherapist has and develops a wide range of knowledge, competencies, and skills appropriate to the role he/she plays in his/her professional clinical practice, health education, and commitment to the implementation of health practices and policies based on quality performance (American Physical Therapy Association, 2013, 2015; World Physiotherapy, 2021). Within these competencies, we find specific technical components (assessment and specific technical interventions), general components that include communication, ethics and deontology, and management, leadership, and organizational skills (World Physiotherapy, 2021). Finally, it is also crucial that they develop scientific competencies, specifically in research, development of evidence-based practice, and the professions' scientific development (World Physiotherapy, 2021). This document also presents and develops the essential domains of professional practice for physiotherapists: assessment and intervention in physical therapy, ethical and professional components, communication, evidence-based practice, interprofessional teamwork, reflective practice and career-long learning, quality improvement, and management and leadership skills (World Physiotherapy, 2021). Physiotherapists must possess and develop competencies in each domain, thus ensuring quality professional practice (American Physical Therapy Association, 2013, 2015; Chartered Society of Physiotherapy, 2013; World Physiotherapy, 2021)

Regarding communication, it is essential that the physiotherapists can communicate precisely, with intelligible vocabulary and adequate to the context, providing an appropriate environment and the development of a relationship of trust, motivation, and empowerment of the patient, allowing for good therapeutic outcomes (European Commission, 2013; Health and Care Professions Council, 2013; World Physiotherapy, 2021). It is also essential to have clinical records with the evaluation, decision making, intervention, and results obtained, updated, and made available to all health professionals who intervene with the patient; it is also essential to promote and coordinate communication according to legal and professional requirements (European Commission, 2013; Health and Care Professions Council, 2013; World Physiotherapy, 2021). They must also promote adequate and accurate information about physiotherapy to users, other social and health agents, and the community (European Commission, 2013; Health and Care Professions Council, 2013; World Physiotherapy, 2021).

Finally, physiotherapists must demonstrate active listening and negotiation skills, based on patient-centered intervention, in order to develop trust and improve the therapeutic relationship with patients as well as the relationship between the multidisciplinary team, allowing for a more effective adaptation of objectives and intervention techniques to the specific situation (European

Commission, 2013; Health and Care Professions Council, 2013; World Physiotherapy, 2021).

Analyzing the situation of physiotherapy in Portugal, the Portuguese Association of Physiotherapists, in 2020, created the Profile of Competencies of the Physiotherapist (Associação Portuguesa de Fisioterapeutas, 2020), within which communication also plays an important role. In this document, regarding communication, it was defined that the physiotherapists must develop and use effective communication strategies to inform clearly, transparently and efficiently the user/group, and promote a good therapeutic and professional relationship. The communication strategy should serve the purpose of clarifying, involving, and motivating the user/group in the process of physical therapy care, aiming at his/her satisfaction. Besides the beneficiaries of physical therapy services, the physiotherapist also communicates with other professionals, scientific, social and political communities (Associação Portuguesa de Fisioterapeutas, 2020). Finally, it is essential to understand, within the training in clinical communication or communication skills, which are the syllabus involved, which concepts are essential to develop, and how the training of health professionals in general, mainly physiotherapists, is developed.

Miciak et al., (2018), in a study that sought to identify the essential components to develop a therapeutic relationship between physiotherapists and users, identified three fundamental components: knowledge of the person and the construction of a relationship of support; support and effective ex-change of information; and the use of the body as a central point for communication development, in which the non-verbal communication, more specifically the touch and the body language, represent an essential component (Miciak et al., 2018).

Similarly, and more specifically in the context of aphasia, van Rijssen et al., (2021) developed a study that aimed to explore and describe experiences and communications needs of health professionals that intervene with aphasic patients. Results showed that health professionals' difficulties in communicating with these patients decreased their recovery potential, commitment, and motivation.

Wijma et al., (2017), in a systematic literature review that aimed to assess physiotherapists' skills for patient-centered communication, through physiotherapists and patients perception, we're able to identify eight main themes that arise in the patient-centered approach such as individuality (knowing the patient and individualized treatment); communication (especially the non-verbal components); support (autonomy and empowerment); education (transmission of knowledge and continuous information) and the definition of therapeutic goals focused on the patient's goals.

Therefore, it is crucial to understand what training programs are available for healthcare professionals, specifically physiotherapists, to improve their knowledge about the fundamental concepts of clinical communication and improve their communication skills.

Thus, the objective of this study was to identify and analyze the courses/training programs in clinical communication or clinical communication skills that exist in Portugal (currently or in the past), aimed at physiotherapists, through a comparative documental analysis, namely of their objectives, typologies, program content and evaluation methods.

## 1. METHODS

Online research was carried out in websites of professional training organizations for health professionals, in the official pages of different university and polytechnic teaching institutions of health courses, as well as in the training departments of different public and private health institutions, in the Portuguese Society of Clinical Communication and the Portuguese Association of Physiotherapists.

The keywords "Clinical Communication", "Training", "Communication Skills Training" and "Training in Health Communication" were used for the search, aimed at physiotherapists. The research was carried out between February and March, and September and October 2021, by searching online announcements and/or publications without specifying the time for the training. Data were analyzed regarding the name of the course, its regime, typology, recipients, place, date, training entity, trainer's qualifications, workload, objectives, syllabus, type of assessment, classification, and academic/professional degree granted (if applicable).

## 2. RESULTS

Eight courses on clinical communication skills or health communication were identified from the search, including one postgraduate course, one master's course, one master's degree, and five professional training courses. All courses were aimed at health professionals from various areas, two online, one in synchronous mode and the other in asynchronous mode, with a slight synchronous component in one of the classes.

Except for one that a Brazilian organization organized; all courses were organized by Portuguese institutions. We identified three higher education institutions, one public vocational training institution, and one private vocational training company regarding the organizing institution. Three courses were organized by the same higher education institution, namely the Faculty of Medicine of the University of Porto. All the course typologies were organized in a theoretical-practical format with compulsory attendance. The course load ranged from eight to 100 curricular hours, plus one academic year of research/dissertation. Only three of the eight courses were postgraduate training, with degree and credit awarding.

Of the eight courses identified, only two did not provide the information on the syllabus, but those that did were somewhat

homogenous, despite different levels in detail and description. The syllabus was aligned with the courses' objectives whenever the information was available. As far as assessment is concerned, the information about the methodology was not explicit in the courses where it was planned. To better visualize and analyze the results obtained, table 1 is presented below.

**Table 1** - Presentation and description of the identified courses.

Course	Date	Local	Entity Trainer	Trainer Qualifications	Scheme (PR, O, distance)	Typology (T, P, T/P)	Work-load	Recipients	Objectives	Teaching Methodology	Type of appraisal	Classification	Degree obtained
<b>Postgraduate Diploma in Clinical Communication Skills (Specialization Course)</b>	From 2007-2008 to the present	FMUP Medical Psychology Unit HSJoão, 2nd floor	Department of Clinical Neurosciences and Mental Health, Faculty of Medicine, University of Porto	FMUP's psychologists and professors	PR	T/P	One academic year	Health professionals from various areas	Teach the communication skills and techniques necessary for building a therapeutic relationship	Theoretical lecture; practice with visualization of clinical vignettes, role-play exercises, and simulated practice with fictitious users	Summative and formative theoretical and practical	0-20	Postgraduate, (30 credits)
<b>Master in Clinical Communication</b>	From 2009-2010 to the present	FMUP	FMUP's Postgraduate Degree Area	FMUP's psychologists and professors	PR (curricular part) Distance dissertation	T/P and research	Two academic years (100 curricular hours + 1-year dissertation)	Health professionals from various areas	To acquire practical training and applied research in the field of Clinical Communication and the clinical relationship with the patient in three phases: basic, advanced, and specialized.	Theoretical lecture; practice with visualization of clinical vignettes, role-play exercises, and simulated practice with fictitious users.	Summative assessment, theoretical and practical assessment in each module; presentation and defense of the master's thesis	0-20	Master (120 credits)
<b>Master's Course in Clinical Communication</b>	From 2009-2010 to the present	FMUP	FMUP's Postgraduate Department	FMUP's psychologists and professors	PR	T/P	One academic year 100 curricular hours	Health professionals from various areas	Acquire training in basic and advanced clinical and research communication skills	Theoretical lecture; practice with visualization of clinical vignettes, role-play exercises, and simulated practice with fictitious users.	Summative assessment, theoretical formative, and practical assessment	0-20	1st year of the Master's program (60 credits)
<b>Health Communication Course</b>	November 2019 and 2020	Health Services of the Autonomous Region of Madeira (SESARAM)	SESARAM's Training Department	No information	PR	T/P	14 hours	Health professionals from various areas belonging to SESARAM	Promote/develop knowledge in health communication	S/I	S/I	N/A	Professional Training

Course	Date	Local	Entity Trainer	Trainer Qualifications	Scheme (PR, O, distance)	Typology (T, P, T/P)	Workload	Recipients	Objectives	Teaching Methodology	Type of appraisal	Classification	Degree obtained
<b>Clinical Communication Skills Course</b>	March 2021	School of Health of the Polytechnic Institute of Porto	ESS Simulation Center, IPP and Cintesís /FMUP	FMUP Psychologist	O (Synchronous and Asynchronous)	T/P	10 hours	Health professors and health professionals from various fields	Develop and acquire knowledge in basic clinical communication skills	Theoretical lecture; practice with visualization of clinical vignettes and role-play exercises	Practical formative assessment	N/A	Professional Training
<b>Health Communication Management Course</b>	2019	SESARAM	SESARAM's Training Department	S/I	PR	T/P	8 hours	Health professionals from various areas, belonging to SESARAM	Acquire knowledge about the management and dissemination of health information and communication with the outside world	S/I	S/I	N/A	Professional Training
<b>Intensive Course in Health Communication</b>	2018 and 2019	FMUM	FMUM's Department of Psychology and Mental Health	FMUM Psychologists and Psychiatrists	PR	T/P	30 hours	Health professionals from various areas	Provide participants with the skills needed for patient-centered practice	Theoretical exposition and practice with standardized patients	Quantitative assessment at the end of the course through OSCE (Objective Examination of Clinical Interview Skills)	N/A	Professional Training
<b>Clinical Communication Course</b>	To be held at any time.	Organized in Brazil, to be attended anywhere	Online Training Company ArtMed 360	Physicians and healthcare professionals specializing in the field of clinical communication	O (asynchronous)	T/P	30 hours spread over 20 classes	Health professionals from various areas	Acquire knowledge about basic and advanced communication skills and telemedicine	Expository theory and practice with the viewing of videos and clinical vignettes	S/I	N/A	Professional Training

Legend for abbreviations: **PR** - Presential; **O** - Online; **T** - Theoretical; **P** - Practical; **T/P** - Theoretical/Practical; **FMUP** - Faculty of Medicine, University of Porto; **SESARAM** - Health Services of the Autonomous Region of Madeira; **ESS** - College of Health; **IPP** - Polytechnic Institute of Porto; **FMUM** - Faculty of Medicine, University of Minho; **S/I** - No information; **N/A** - Not applicable

**Table 2** - Program contents of the identified courses.

Course	Program Contents
Postgraduate Diploma in Clinical Communication Skills	<b>Module 1</b> - Clinical Communication Skills: Introduction; <b>Module 2</b> - Structuring an Interview: Patient-centered Interview; <b>Module 3</b> - Structuring an Interview: Clinician-centered Interview; <b>Module 4</b> - Non-Verbal Behavior; <b>Module 5</b> - Building the Clinical Relationship; <b>Module 6</b> - Dealing with Emotions: Sadness, Fear, Anger; <b>Module 7</b> - Giving Bad News; <b>Module 8</b> - Motivational Interviewing; <b>Module 9</b> - Dealing with Specific Situations: Patient unable to speak; Anxious Patient; Depressive Patient; <b>Module 10</b> - Relationship with the Family; <b>Module 11</b> - Clinical Relationship with Children and Adolescents; <b>Module 12</b> - Clinical Relationship with the Elderly; <b>Module 13</b> - Self-Awareness and Self-Help
Master in Clinical Communication Skills	<b>Module 1</b> - Clinical Communication Skills: Introduction; <b>Module 2</b> - Structuring an Interview: Patient-centered Interview; <b>Module 3</b> - Structuring an Interview: Clinician-centered Interview; <b>Module 4</b> - Qualitative Analysis Techniques; <b>Module 5</b> - Non-Verbal Behavior; <b>Module 6</b> - Construction of the Clinical Relationship; <b>Module 7</b> - Dealing with Strong Emotions: Sadness, Fear, Anger; <b>Module 8</b> - Communicating Bad News; <b>Module 9</b> - Motivational Interviewing; <b>Module 10</b> - Dealing with Specific Situations: Patient Unable to Speak; <b>Module 11</b> - Dealing with Specific Situations: Anxious Patient; <b>Module 12</b> - Dealing with Specific Situations: Depressive Patient, <b>Module 13</b> - Relationship with the Family; <b>Module 14</b> - Clinical Relationship with Children and Adolescents; <b>Module 15</b> - Clinical Relationship with the Elderly; <b>Module 16</b> - Self-Knowledge and Self-Help; <b>Module 17</b> - Methodology of Scientific Research; Master's Dissertation
Master's Course in Clinical Communication Skills	<b>Module 1</b> - Clinical Communication Skills: Introduction; <b>Module 2</b> - Structuring an Interview: Patient-centered Interview; <b>Module 3</b> - Structuring an Interview: Clinician-centered Interview; <b>Module 4</b> - Qualitative Analysis Techniques; <b>Module 5</b> - Non-Verbal Behavior; <b>Module 6</b> - Construction of the Clinical Relationship; <b>Module 7</b> - Dealing with Strong Emotions: Sadness, Fear, Anger; <b>Module 8</b> - Communicating Bad News; <b>Module 9</b> - Motivational Interviewing; <b>Module 10</b> - Dealing with Specific Situations: Patient Unable to Speak; <b>Module 11</b> - Dealing with Specific Situations: Anxious Patient; <b>Module 12</b> - Dealing with Specific Situations: Depressive Patient, <b>Module 13</b> - Relationship with the Family; <b>Module 14</b> - Clinical Relationship with Children and Adolescents; <b>Module 15</b> - Clinical Relationship with the Elderly; <b>Module 16</b> - Self-Knowledge and Self-Help; <b>Module 17</b> - Methodology of Scientific Research
Health Communication Course	No information is available online
Clinical Communication Skills Course	Basic communication skills; Cynical interview models; Empathic communication techniques
Health Communication Management Course	No information is available online
Intensive Course in Health Communication	Interpersonal relationship and communication in clinical context - Non-verbal communication Interview techniques - Neurobiology of communication - Specific situations: bad news, informed consent, and sexuality Specific situations: adaptation to the chronic disease, aggressive patient, patient unable to speak and interview with family - Communication with the public Specific situations: adaptation to chronic illness, aggressive illness, patient unable to talk and interviewing the family - Communicating with the public Practical workshops (10 hours)
Clinical Communication Course	<b>Class 1</b> - Communication with people with symptoms of complex characterization; <b>Class 2</b> - General concepts and effective clinical communication - Non-violent communication; <b>Class 3</b> - Essential skills and attitudes for effective clinical communication - Professionalism; <b>Class 4</b> - Person-centered approach; <b>Class 5</b> - Motivational interviewing; <b>Class 6</b> - Emotional reactions of health professionals in clinical encounters; <b>Class 7</b> - Introduction to Balint groups + offering a Balint group (synchronous); <b>Class 8</b> - Communication with strong emotions: Empathic response to anger, fear and sadness in health care; <b>Class 9</b> - Clinical communication skills training and narrative medicine for teaching clinical communication; <b>Class 10</b> - Video and feedback; <b>Class 11</b> - Communication with children and their families before adolescence; <b>Class 12</b> - Communication about sexuality; <b>Class 13</b> - Clinical communication and spirituality; <b>Class 14</b> - Communication through virtual media; <b>Class 15</b> - Health risk communication; <b>Class 16</b> - The sacred consultation (of high emotional content) and relationship building; <b>Class 17</b> - Communication of difficult news; <b>Class 18</b> - Communication at the end of life; <b>Class 19</b> - Cross-cultural clinical communication; <b>Class 20</b> - Communication in situations of violence.

### 3. DISCUSSION

Given the analysis of the results obtained, it is possible to verify that all courses were generally directed to health professionals, and no specific training for a particular health profession or clinical context was found. This finding differs in part from what is usually found in the literature, whose training of communication skills, despite being directed to several different health professionals, is often directed to a specific health situation or context, as identified for example in the studies Miciak et al., (2018), which aimed to assess the components of communication in rehabilitation; in the study by van Rijssen et al., (2021), which trained health professionals caring for patients with aphasia; and in the systematic review by Wijma et al. (2017), which looked specifically at the patient-centered communication skills of physiotherapists.

Through a more exhaustive search, it is also possible to verify that training in communication skills is more often addressed to physicians and nurses, in exclusive groups, and then in clusters of several health professions. The studies by Tavakoly-Sany et al.,

(2020), Nakagawa et al., (2019) and Tanzi et al., (2020) specifically addressed to physicians and the studies by Keer et al., (2020) and Banerjee et al., (2017) were addressed to nurses.

This is probably because training in communication skills has been integrated earlier in the curricular training of physicians and nurses than in the other health professions (Banerjee et al., 2017; Kerr et al., 2020; Nakagawa et al., 2019; Tanzi et al., 2020; Tavakoly et al., 2021).

Concerning communication skills training, the most frequent intervention areas are oncology, working on delivering bad news (Banerjee et al., 2017; Tanzi et al., 2020); in cardiovascular diseases to increase adherence to healthy behaviors and lifestyle habits (Backman et al., 2020; Nakagawa et al., 2019), in obesity prevention and control, to increase motivation (Sease et al., 2021) and physical activity (McCoy et al., 2017), and in mental health diseases, on how to build trust with a patient in a therapeutic relationship (Papageorgiou et al., 2017).

Regarding communication skills training for physiotherapists, it is usually organized with other professional groups and usually does not have a specific scope of intervention (Denniston et al., 2017; vanRijsen et al., 2021).

This finding suggests that since the therapeutic intervention is more effective in a multidisciplinary team (Ellis & Sevdalis, 2019), communication skills to be developed are comprehensive and should ideally involve the whole team considering that the therapeutic goals are more easily achieved through an interdisciplinary intervention (Abaraogu et al., 2019; Ellis & Sevdalis, 2019). The homogeneity of the syllabus was found, essentially directed to basic and advanced communication skills. It may be related to the fact that the courses are not specific to any particular pathology or condition but instead directed to health communication in general, addressing the essential topics inherent to clinical communication.

However, the technical specificity of the physiotherapist intervention, with an enormous range and variety of areas of intervention and specialization, suggests that the training of communication competencies should have a specific component for physiotherapy. The therapeutic relationship created with the users is very close and of trust. Motivation, positive reinforcement, support for autonomy, and even shared decision-making are essential to increasing the users' confidence and motivation levels (Norris et al., 2019; Wloszczak-Szuba & Jarosz, 2013). Patient-centered communication plays an important role (Wijma et al., 2017), thus increasing their collaboration and involvement in the rehabilitation process, components without which the results obtained are strongly compromised (Wijma et al., 2017; Wloszczak-Szuba & Jarosz, 2013). This was not found in the syllabus of the courses identified in this comparative documentary analysis, probably because communication skills training is not yet consistently implemented in the professional training of physiotherapists. Hence, pregraduate training consists of basic communication concepts and skills on patient interviews and a light approach on advanced communication skills, but in general. It contradicts what is stated in the physiotherapist competencies profile and physiotherapists' training objectives worldwide, where communication training is considered essential and should be done throughout the whole career (World Physiotherapy, 2021).

Therefore, there is a need to include training in shared decision-making, support for autonomy, and even coaching or motivational interviewing for physiotherapists to stimulate their clients' involvement, motivation, and autonomy (Akhbari et al., 2019; Miciak et al., 2018; Norris et al., 2019; Wijma et al., 2017).

The fact that we did not find a large offer of training in clinical communication or training of communication skills for physiotherapists and other health professionals is in line with the majority of studies that suggest that training of communication skills is more frequent in the medical and nursing professions than in other health professions (Ajawi & Higgs, 2012; Doyle et al., 2013; Keer et al., 2020; Tanzi et al., 2020).

The information found is not very descriptive; however, all courses have a theoretical-practical approach. Two of the courses (of professional training, not organized by higher education entities) do not refer to the teaching methodology.

In the courses that mention it, the theoretical part is expository, and the practical part includes watching videos, role-playing, and simulation of cases with standardized patients in one of the courses.

The fact that some courses do not provide all the information online could have been overcome through direct contact with the organizing entity in order to request more detailed information, which could translate into a limitation of the present study. However, it was decided not to do so, because the intention was to understand what information was freely available, and easily accessible to possible interested parties who searched for the information.

This finding may suggest a better formative quality in postgraduate or higher education courses, which is easily understood because they are more complete courses, with more time load, and more specific and documented programmatic content. This finding is also justified because higher education institutions have to describe and make the description and syllabus of all their training offer on the institution's website, which is why the information is more accessible and detailed.

## CONCLUSION

In addition to identifying the scarce formative offer in clinical communication and/or training of communication skills aimed at physiotherapists, the study allowed us to understand which methodologies were used, programmatic contents, and assessment methodologies. It was possible to conclude that despite having a different time load, the program contents were similar and adequate to the defined objectives in the situations where the information was available.

It was also possible to identify the predominant teaching methodology of theoretical expository and practical nature with the visualization of clinical vignettes and role-play activities and interviews with fictitious patients and their assessment methodology. However, the information provided on assessment methodology was not explicitly and clearly described. This is probably because the research was online, and not all the available information was available, constituting an explicit limitation to this study.

The study was also important to establish the formative needs in training and communication skills more directed to physiotherapists.

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