Chapter 16 –The communication process

Key Terms:

**Communication process-chapter 16**

* Explain the importance of effective communication among different cultures in health care
* Describe the relationship between effective communication with various culture to enhance patient well–being
* List and describe the steps that occur in effective communication
* Define and explain the four types of questions use in the health care setting
* Explain non-verbal communication and give 3 examples for the US and 3 examples common to other cultural groups
* Explain the meaning of “active listening” in US culture and how this varies in other cultures
* Define empathy as we view in the US and explain its application in health care
* Explain the meaning of feedback
* Identify common barriers that can prevent effective communication in the US and in other cultural group settings
* List techniques used when communicating with patients with special needs
* Describe the elements that make up culturally effective patient education
* Describe good techniques of telephone communication and how this skill will enhance your employability as a health care worker
* List ways to handle situations the involve gossip

**Steps in effective communication:**

1. **Set communication goals**: Determine what is to be accomplished, including patient needs, current circumstances
* Learn to ask specific questions if you want more than a programmed response. For example, don’t ask, “How is your pain today? Rather ask, “On a scale of 1-10, what is your pain level today?
* Remember health care communication usually takes place at a deeper level than everyday casual communication
* Health care communication must to clear and accurate
* Typical communication goals include: to gather as much objective and subjective information as possible from a patient, instruct individuals so that family member or other care givers understand, inform patient about benefits of treatment, report patient care information to other healthcare workers on next shift

In every patient care interaction the health care worker should:

1. Demonstrate sincere concern for the patient’s welfare by giving a warm smile, using a gentle manner, not acting hurried, listening carefully
2. Establish Trust by using eye contact, explain procedures, explain everything you are going to do, following through with anything you say you are going to do
3. Enhance the patient’s self-esteem by involving the patient in all decisions about their care, providing privacy,

Remember when collecting information, evaluate:

1. Patient’s level of understanding- age, language they speak, any learning disabilities, is patient confused or disoriented?
2. Is the patient fearful? Is the patient using a defense mechanism? Is the patient ready to receive information
3. Is the patient in pain? Is the patient on medications that causes disorientation, confusion? Does the patient have a hearing, visual or speech impairment that affects communication?
4. How urgent is the communication?
5. **Create the message:** Select and organize appropriate content based on the communication goals
* Use language that is not culturally specific
* Use language appropriate for the age
* Use language that is understandable (not medical terminology)
* Organize long messages in steps
* Rank information in order of importance
* State facts and following with explanation
* Ask clarifying questions and make sure the patient demonstrates understanding.
* Use humor when appropriate. When in doubt, leave it out. Never use humor at the expense of others!

Some types of questions:

1. **Closed-ended questions**- answered with a single word or yes or no
2. **Open-ended questions**-cannot be answered with a simple yes or no
3. **Probing questions**-requests for additional information for clarification
4. **Leading questions-**those in which all or part of the answer is included in the wording or the question. Should be avoided
5. **Deliver the message:** Choose a delivery message best suited for ensuring that the receiver will understand the intent of the message
* Who is the patient? What is their cultural background? Who makes decisions on behalf of the patient?
* Make sure you talk directly to the patient
* Make sure you address patients as Mr., Mrs., Ms. Unless the patient requests that you address them differently
* Use nonverbal communication that is communicates kindness, patience, confidence, and empathy. Remember nonverbal communication includes tone of voice, body language, gestures, facial expressions, touch and physical appearance. Up to 70% of the meaning of a message is expressed nonverbally
* Remember pantomime (gestures) can help emphasize and enrich spoken messages
* Use touch that conveys caring and concern
* Make sure the environment is private, lighting appropriate, comfortable, quiet enough for the patient to hear you
1. **Listen to the response**: Employ listening and observational techniques to determine whether the message was received as intended
* Use active listening skills focusing fully on what the speaker is saying by clearing your mind of distractions, facing the sender, focus your attention on the sender, maintain eye contact as appropriate for culture, turn off self talk, do not make value judgments about what you hear, mentally note anything that needs clarification, do not interrupt
1. **Offer feedback and seek clarification**: Rephrase what is heard or ask questions to check understanding of the response
* **Paraphrasing**- the receiver rewords the sender’s message in the receiver’s own words and then ask the sender for confirmation
* **Reflection-** prompts the receiver to either complete or add more detail to the original message. Ex. You say you hate to take your medication because \_\_\_\_\_\_\_\_ (pause and allow time for a response)
* **Asking questions-**Request clarification and additional information. Many words such as difficult, painful and a lot have different meaning for people. Example: “what symptoms are your experiencing when you say you are feeling terrible?
* **Requesting examples-**Examples can help more clearly explain and fill in meaning. Ex. “Tell me about he kind of situation in which you feel nauseated? “
1. **Evaluate the encounter and revise the message**: Determine whether the goal was met. If not, why not? What other options are available? What should be the next step?
* Did I clearly state my message? Did I present them at a level appropriate for the receiver? Did I listen actively? Which part of the message was misunderstood?
* Constantly check for understanding by listening, observing, and asking for feedback
* Remember communication barriers like language barriers, cultural differences, defense mechanism, physical distractions, sensory impairments, medication effects, pain

Patients with special needs:

1. Terminally ill- Patients who are dying have reported that the loneliness they encounter is worse that the prospect of death itself
2. Patients who are in pain, medicated, confused or disoriented: identify yourself and say the patient’s name, maintain eye contact, speak slowly and clearly, use simple language, keep messages short, give patient time to respond, use touch if appropriate, repeat message if needed, if appropriate, give patient written information too
3. Patient’s with hearing, visual or speech impairments: You might assess impairments by the patients leaning forward and turning the head, asking your to repeat information, failing to hear when not facing the speaker, not responding to you when you ask a question or finish speaking

You can improve communication with hearing impaired by:

* Positioning yourself close to the receiver and speak face to face
* Remove or turn off sources of noise
* Have the light source directed to your face
* Make sure your mouth is visible to listener
* Speak distinctly
* Do not shout or exaggerate words
* Maintain a low to moderate pitch of voice
* Use short sentences
* Watch for signs of comprehension
* Do not change the subject without warning

You can improve communication with visually impaired by:

* Start all communication by announcing your presence
* Before starting a procedure describe any equipment to be used and its position in relationship to the patient
* Tell the patient where you will be touching them
* Give clear and complete directions
* Let the patient know when you are leaving
* Give specific information about where doorways are, uneven surfaces
* Give extra verbal information to describe anything that would be usually expressed nonverbally
1. Patients who are angry:
* Never respond in anger or argue with the patient
* Remain calm and courteous
* Listen attentively to the patient’s concerns
* Offer a sincere apology, if necessary
* Do not raise your voice
* Be aware of your body language
* Do not raise your voice
* Express concern and interest, not annoyance
* Answer the patient’s questions
* If you can not resolve the problem ask your supervisor for help
* If the patient is cursing or using threatening language, state politely that you are willing to listen, but will not tolerate curing or threatening language
* Ask for help or call security when needed
1. Patients who do not speak English
* A smile is a universal sign of good will
* Determine if the patient speaks or understands any English at all
* Speak slowly and clearly
* Do not raise your voice
* Use simple words and sentences
* Try repeating your message in different words
* Use gestures and pantomime
* Write the message
* Use picture, if available
* Request an interpreter

Elements of proper phone communication:

* Speak clearly and pronounce words correctly and distinctly
* Speak at a moderate rate of speed. When giving instructions or directions, speak more clearly
* Project warmth, friendliness and caring
* Smile as you speak unless it is inappropriate in the situation
* Put expression in your voice. Avoid a monotone voice
* Allow appropriate period of silence to give the other person an opportunity to speak
* Never chew gum or eat when speaking on phone