Communication Skills

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Aim of Session

- To develop an understanding of the processes and skills that are involved in effective communication with patients and clients.
Objectives

- Identify methods of communication
- Demonstrate a basic understanding of skills needed for effective listening
- Demonstrate how these skills can be used to improve the communication process
- List the barriers to communication
- Identify professional boundaries in effective communication.
Why Communicate?

- To develop relationships
- To increase our knowledge
- To make our feelings and thoughts known
- To find out about people
- To find out information
Communication in Nursing

- Essential to be able to develop therapeutic relationships with patients.
- To be able to identify problems accurately from the patients' perspective.
- To be able to plan and deliver appropriate care.
- To develop professional relationships with colleagues within the team.
Effective Communication

- Increases patient satisfaction and health outcomes
  (Barlett, Grayson et al., 1984)
- Reduces the risk of complaint and litigation
  (Beckmam 1994)
- Higher levels of job satisfaction
  (Kramer et al., Suchman et al., 1993)
Goal of Effective Communication

- Shared Meaning
- Accuracy
- Efficiency
- Supportiveness
Can Communication skills be taught?

- Communication is a clinical skill
- Experience is a poor teacher
- There is conclusive evidence that communication skills can be taught
- That communication skills teaching is retained
How do we communicate?

By using

Mechanical methods

Verbal methods

Non verbal methods
Verbal Methods (spoken word)

- Questioning
- Facilitation
- Empathic statements
- Clarification
- Summarising
Types of Questions

- Open (broad) – gives control to respondent, allows disclosure
- Open (focused) – gives control to respondent within a given area, encourages disclosure of feelings
- Closed – control is with interviewer, checks information
- Leading – control with interviewer, suggests desired response
Facilitation

The ability to overcome obstacles and make it easier for the patient to verbalise their concerns by:

- Acknowledging and legitimising the problem
- Showing a willingness to share the patients feelings
Empathy

The ability to see things from the person’s perspective and sharing that understanding with the person.
Clarification

- Clarification is required when the patient uses an ambiguous word.

- Other words which need clarification are those which have a social and a professional meaning e.g. “depressed”
Summarising

- Involves sorting out the information you have been given and demonstrated that you have been listening.
- By sharing this with the respondent any misconceptions or misunderstandings can be cleared up.
Non Verbal Methods

- Listening (active and passive)
- Silence
- Touch
- Hand gestures
- Eye contact
- Posture
- Facial expression
Active Listening

Giving your full attention to

- The verbal message
- The tone of voice
- The person's posture
- The person's gestures
- Understand thoughts, feelings and behaviour

Focus is on ‘being with’ rather than ‘doing’
S O L E R

- **S** = sit *Squarely in relation to the patient*
- **O** = Open position
- **L** = Lean slightly towards patient
- **E** = Eye contact
- **R** = Relax

Egan (1986)
Effective Communication

- Your verbal and non verbal cues need to convey the same message
  e.g. a verbal empathic response needs to be linked with empathic behaviour if the message is to be believed. Otherwise the non verbal cues will be believed

- Verbal and non verbal cues of others need to be considered
Barriers to Communication

- Language
- Technical terms
- Sensory impairment
- Mental disability/Physical disability
- Capacity to understand
Barriers to Communication

- Practical considerations
- Lack of knowledge
- Being too busy / not enough time
- Cannot deal with the emotion of the patient or themselves
- Not being able to do anything about it so why ask
Barriers to Communication

- Being frightened of upsetting the patient
- Causing more harm than good
- Being frightened of difficult questions
- Saying the wrong thing/getting into trouble
Barriers to Communication

- Being seen as too busy
- Belief that health care professionals are only concerned about physical care.
- Not wanting to burden anyone else with their problems
- Concerns about the future
Barriers to Communication

- Feelings that their concerns may be trivial
- Fear of admitting that they are not coping
- Fear of losing control
- Not being able to express how they feel
- Anxiety about having worst fears confirmed

(Maguire 1985)
Barriers to Telephone Communication

- Not being able to see each other
- Surrounding Noise
- Being interrupted
- Time Pressure
- Emotional Barriers
- Language/Accent/Dialect
Answering Incoming Calls

- Smile as you answer the telephone
- Introduce yourself confidently and clearly.
- Listen - give your full attention to the caller
- Find out who is calling - ask, spell, repeat
- Use the person's name in the conversation
- Message - write down clearly, repeat back
- Information – give clearly and confidently
- Don’t forget to say goodbye!
Professional Boundaries and Communication

- Reporting
- Documentation
- Confidentiality
- Privacy
- Data Protection
Further Reading
