

### **Communication skills in Nursing**

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The way we treat our children in the dawn of their lives, and the way we treat the elderly in the twilight of their lives, is measure of the quality of a nation. Hubert Humprey



### The schedule of the tuition

- First part will be little bit theoretical orientated
- Second part will be practical work with the model situations

# **Functions** of Communication

- Control
- Motivation
- Emotional Expression
- Information

Effective communication is one of the important clinical skills. The caregivers can and have to improve health care delivery today. Communication skills are more than a "toolbox" of devices. Rather, they are means of developing a dialogue and rapport with patients that enhance human connection and health outcomes. Dr. Toni Laidlaw



# Communication in Nursing as with all of the medical field is crucial.

Nurses have to be intermediaries between doctors and patients.

They have to execute what the medical hierarchy expects of them and they must take proper care of the patients.

Communication in Nursing involves both non-verbal and verbal communications.

## The Communication Process

Source → Encoding → Channel→ Decoding → Receiver

Feedback

### **Effective communication**

- •This needs to involve the patient and be understood by the patient.
- •There also needs to be effective communication between all members of the team to ensure that the patient has the right care.
- Communication to relatives and to other agencies if the person will need continuing care when they get home.

### Imagine<sup>©</sup> that you are a nurse....

### Which one would you like to be









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### Therapeutic communication in nursing allows

For the patient and family to feel like someone actually cares for him or her in their time of need.

# This can be fundamental in the recovery or death process of a patient.

## What do you think is the most important task when you communicate with the patients

- •to give information
- to recognise needs of patients
- to educate the patients
- •to ensure what are the patients worried about
- •to ensure what are the patients feelings
- •others.....

## What do you think is the most important skill when you communicate with the patients

- speaking
- listening
- watching
- touching
- moving
- others...

UNDERSTANDING



- **Remember:**
- the clients and the nurse can have
- different perception of reality and the nurse needs to begin the assesment process with the open mind

# Factors that affect communication

Nurse needs to assess and consider when communicating with patient:

- culture
- roles and relationships
- environment
- attitudes and values
- level of self esteem



- developmental level
- physical & psychological barriers
- personal space (proxemics)
- territoriality

### **Type of communication**

### Verbal

conscious use of spoken or written word

choice of words can reflect:

- age,
- education,
- developmental level,
  - culture etc.

Feelings can be expressed through tone, pace, etc.

### **Non-verbal**

less conscious than verbal

use of gestures, expressions, behaviors (body language)

85 % of communication

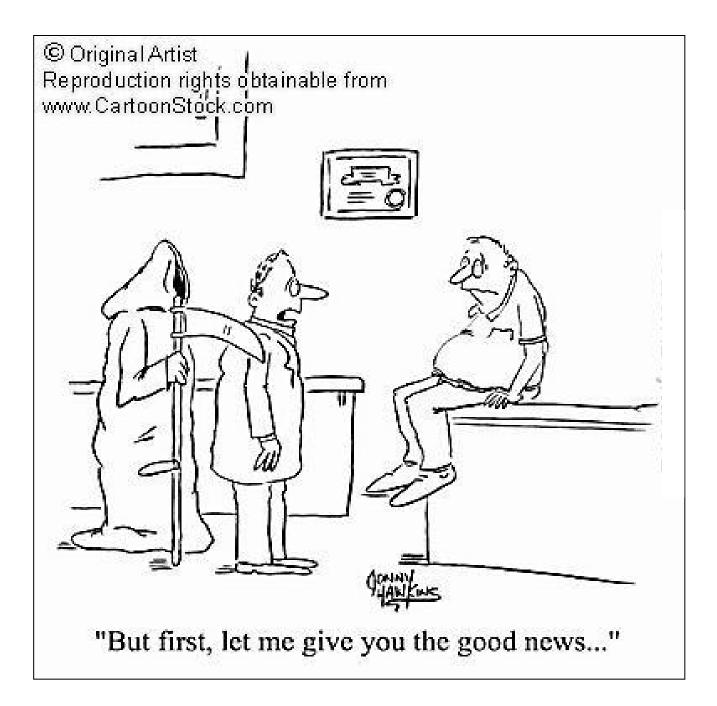
requires systematic observation and valid interpretation

### Relationship between verbal and non-verbal communication

<u>Congruency:</u> are verbal and non-verbal messages consistent?

Nurse states observations and validates with patient.

Nurse to crying patient: "You seem upset today." Patient: "I'm fine thanks." HOW CAN YOU VALIDATE THE FEELINGS OF THE PATIENT?



### Nonverbal communication cues can play five roles

**Repetition**: they can repeat the message the person is making verbally

**Contradiction**: they can contradict a message the individual is trying to convey

**Substitution:** they can substitute for a verbal message. For example, a person's eyes can often convey a far more vivid message than words and often do

**Complementing**: they may add to or complement a verbal message. A boss who pats a person on the back in addition to giving praise can increase the impact of the message

**Accenting:** they may accent or underline a verbal message. Pounding the table, for example, can underline a message.

Source: The Importance of Effective Communication, Edward G. Wertheim, Ph.D.

## It's not what you say, it's how you say it

#### INTENSITY

- a reflection of the amount of energy you project is considered your intensity. Again, this has as much to do with what feels good to the other person as what you personally prefer.

#### TIMING AND PACE

- Your ability to be a good listener and communicate interest and involvement is impacted by timing and pace.

#### SOUNDS THAT CONVEY UNDERSTANDING

- sounds such as "ahhh, ummm, ohhh," uttered with congruent eye and facial gestures, communicate understanding and emotional connection. More than words, these sounds are the language of interest, understanding and compassion.



### **Types of nonverbal communication** and body language

**Facial expressions** (happiness, sadness, anger, surprise, fear, and disgust are mostly the same across cultures)

Body movements and posture (posture, bearing, stance, and subtle movements)

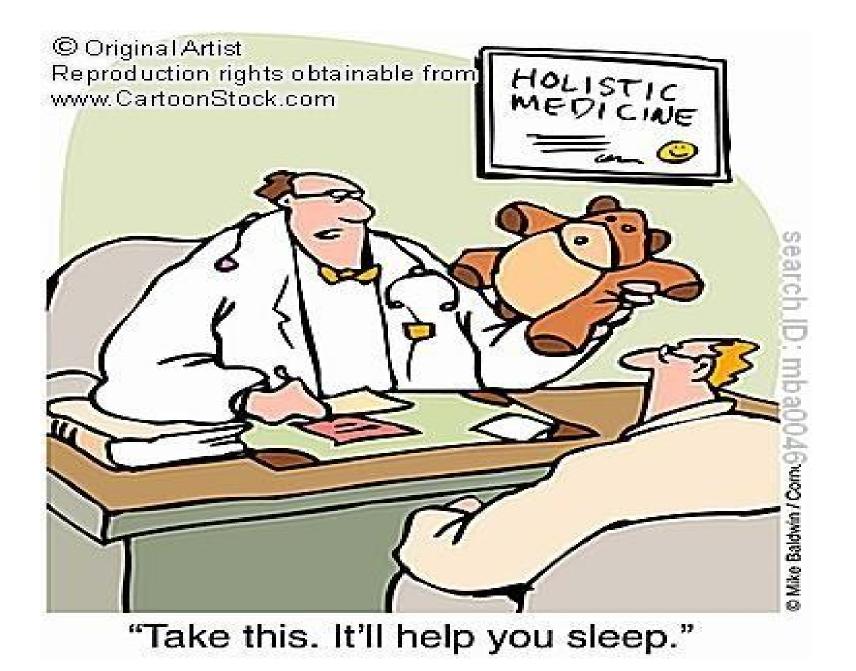
**Gestures** (intercultural differencies etc.)

**Eye contact** (lasting, direction)

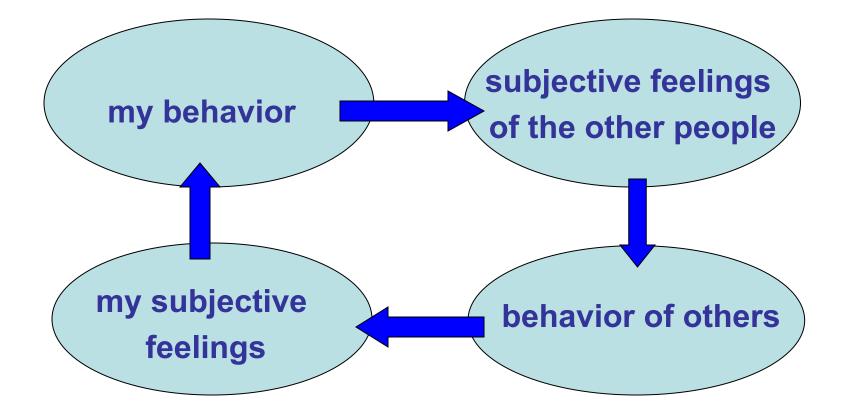
**Touch** (social touching x nursing interventions)

**Space** (signals of intimacy, aggression, dominance or affection)

#### Voice



### Social interaction





### **Communication becomes a major determinant of a succes**

### in the health promotion, health teaching, and compliance

with health care issues

(Burke and Sherman, 1993)



### Do you think it is important to inform the patients about our actual feelings?









# What kind of the relationship do we have to have with the patients

### **Helping relationship**

- Helpers take responsibility from the conduct of the relationship
- Relationship determinates when the identified goals are met.
- Relationhip is entered through the use of necessity
- Self-disclosure is limited for the helper; encourage for the helpee
- Understanding should always be put into the words

**Social relationship** 

- Both parties have an equal responsibility for the conduct of the relationship
- Relation may or may not have specific purpose or goals
- The needs of both partners should receive equal attention
- Understanding does not necessarily need to be put into words



### The goal of any therapeutic relationship

- empover clients to be all that they can be as they cope with the situations, problems, and people that inevitably present themselves during each person's live
- nurses empover clients every time they foster their client's selfdirection in choosing treatment options, goal setting and problem solving the best way to achieve them as partners in care
- Information is always a necessary foundation for empowerment

(D´Alessandro&Dosa 2001)

**Empowerment:** 

enabling people to choose to take control over and make decisions about their lives (Rodwell 1996)

## **Barriers to Effective Communication**

- Filtering
- Selective Perception
- Emotions
- Language

### **Common barriers of communication** with patients

- Anxiety
- Lack of time
- Lack of experience
- Stereotyping
- Space violation
- Dysarthria
- Dysphasia

- Dementia
- Other cognitive problems
- The unlikeable patient
- Others.....

### **Blocks of Communication**

### Etiology of poor communication

- Offering Cliché Reassurance
- Giving Advice
- Answering your own questions
- Giving Excessive Praise or Reprimands
- Defending Against Complaints
- Using Parenting Approaches of Behavior

### **Not Listening**

is most harmful behavior!

### Useful communication techniques Facilitating communication

- Use of Touch
- Use of Multiple Modalities
- Active listening
- Use open-ended rather then closed-ended questions
- Dealing with Memories and Reminiscences
- Role Modeling
- Others.....

### **Use of Touch**

Nurses should be sensitive to their own style of touching:

•how it is done, to whom, when, and why

(Watson)

The important thing is to acceptate the hierarchy of places on the body that are appropriate to touch

(e.g. the hands, shoulders, back, arms)



### Use of Multiple Modalities

 Using more than one sense in communication facilitates the process of communication;

• You are able to understand not only trought normal communication channels (ears, eyes) but you can use your heart too.



### **Role modelling**

It is one aspect of care through which we indirectly affects the interpersonal relationships between the patients and caregivers (e.g. medialisation, externalisation).

### **Active listening**

### The steps of active listening:

- ENCOURAGEMENT
- CLARIFICATION EXPLANATION
- PARAPHRASE/ing
- **REFLECTION MIRROR**
- SUMMARISING
- APPRECIATION evaluation

## How to Be an Effective Listener

- What You Think about Listening ?
- Understand the complexities of listening
- Prepare to listen
- Adjust to the situation
- Focus on ideas or key points
- Capitalize on the speed differential
- Organize material for learning

### Dealing with memories and Reminiscences

This can be a very meaningful way through which especially older adults review their life, establish its meaning and confront their conflicts/negative acts.

- Ask explorative questions
- Use the memory as a bridge to other information
- Find a cue for questions within frequently heard stories
- Practice the ways how to tell the person that you have already heard this story

### Levels of nurses actions

- **1. Accepting** use client's correct name, respond to cues
  - maintain eye contact, adopt open posture
- **2. Listening** nods head, smiles, encouraging responses,
  - use therapeutic silence
- **3. Clarifying** ask open ended question, restate the problem validate perception, acknowledge confusion
  - **Informing** provide honest, complete answers,
    - assess client's knowledge level
- 4 5 Analyzing identify unknown emotion,
  - interpret underlying meanings, confront conflicts

### How to be confronted with patients emotions

### NURSE – ing and Emotion

- **N-Name the emotion**
- **U** Understand the emotion
- **R** Respect or praise the patient
- **S** Support the patient
- **E- Explore what underlies the emotion**

Robert Smith has created this useful mnemonic to recall four basic techniques to use when confronted by patients emotions



### WHAT IS CARE? Comfort Acceptance Responsiveness Empathy

Empathy is the sense that "I could be you" and is what patients are ussually feeling when they comment about a physician that really cared for them (Spiro, 1993)

 35 years old man was addmitted after the car accident at the ER unit where you work as a nurse.

He is independent (ADL 100 points), but his eyes are covered with the bandages.

He is little bit confused, he does not know where his family is now and what is their condition.

35 years old man was addmitted on surgical unit where you work as a nurse.
He's been blind since he was two years old. He is affraid of his future because of the really big headache (his operation is planned for tomorrow).

 30 years old woman was addmitted at the gynaecological unit because of the bleeding.

She is pregnant (36 week) and it is her first pregnancy.

 30 years old woman was addmitted at the gynaecological unit because of the bleeding.

She is pregnant (36 week) she has already two children at home.

# Solve the problems of the patients

- What should you do as a first step...
- What will you be focused on firstly...
- What will be the goal of your care in the nearest 30 minutes...
- What kind of communication techniques
   you will use...
- Do you think you can use the universal approach to all these patients....

### Many attempts to communicate are nullified by saying too much.

**Robert Greenleaf** 

### Seek first to understand, then to be understood.

**Stephen Covey** 

Thank you for your attention, ideas, work and patience