

Communication skills

for **Building Relationships**

#1. GREETINGS & INTRODUCTIONS

Hello, my name is Linda Ryan and I am the doctor/nurse/physiotherapist looking after you today. What is your name?

John Grace

How do you like to be called?

Johnny

And who is with you here today?

My daughter Mary

#2. NON-VERBAL BEHAVIOUR



Warm facial expression



Good eye contact



Open body language



Appropriate volume, slow pace & warm tone of voice



Keep the focus on the patient while making notes or using the computer

#3. INVOLVE THE PATIENT



Establish that the patient can hear and understand you



Share your thinking

What I am thinking now is...



Ask permission for what you are doing

Is it ok if I take your blood pressure?

#4. EMPATHY G.I.V.E.

G **Get**
Pause when you notice emotion

I **Identify**
"I can see that you are worried"

V **Validate**
"It's overwhelming – everything you've been going through"

E **Explore**
"Tell me more"



Find out more: www.hse.ie/nhcprogramme



Communication skills

for **Initiating the Consultation**

#1. PREPARE



Prepare yourself

- Personal appearance
- Complete any outstanding tasks



Prepare the environment

- Pen, paper, healthcare record
- Ensure privacy
- Turn phone to silent



Prepare your information

- Read records carefully
- Summarise what you know
- Consider your agenda

#2. ESTABLISH INITIAL RAPPORT



- Greet patient
- Obtain patient's name



- Introduce yourself, your role and the nature of the consultation
- Check how patient prefers to be addressed



- Obtain consent

- Demonstrate respect and interest



- Tell the patient what you have done to prepare for the consultation

I have read the letter from the GP

#3. IDENTIFY THE REASONS FOR THE CONSULTATION



- Begin with an open question

How can we help you today?



- Listen attentively without interrupting



- Elicit list of issues to discuss
 - Screen for further problems

What else?



- Negotiate agenda
- Summarise shared agenda

How does that sound?



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Communication skills

for **Gathering Information**

#1. EXPLORE THE PATIENT'S PROBLEM

Encourage the patient to tell their story

Tell me about the problem

Screen for other problems and symptoms

What else?

Use summaries

Can I just check I've got it right - the problem started two weeks ago...

Use a mixture of open and closed questions

Have you noticed any changes in your sleeping?

Listen attentively without interrupting

Respond to non-verbal cues

You look sad when you talk about your mother

Use easy to understand language

#2. UNDERSTAND THE PATIENT'S PERSPECTIVE

Use **I.C.E.** to establish what the patient is thinking

I IDEAS
What has the patient been thinking about their problem?
"Why do you think this has happened?"

C CONCERNS
Sometimes a patient may have concerns that you have not considered
"What has been the main worry for you?"

E EXPECTATIONS
What does the patient think might be the appropriate action?
"What do you think might be the best way forward?"

Feelings
Respond to verbal or non-verbal cues

I can see that this has been frustrating for you

Effects of illness
Use open questions to explore this

How is this affecting you?

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Communication skills

for Providing Information and Planning

#1. PROVIDE CORRECT AMOUNT AND TYPE OF INFORMATION

- Assess the patient's starting point
- Break the information into 'chunks'. Check the patient's understanding of each chunk

We covered a lot today. To make sure that I've explained things clearly, can you tell me...

- Ask what other information would be useful
- Avoid giving advice or reassurance prematurely

#2. AID PATIENT RECALL AND UNDERSTANDING

- Use easy to understand language
- Slow down
- Organise the explanation/signpost

First I want to tell you about... & then I am going to talk about...

- Use visual aids
- Check understanding

What questions do you have for me now?

#3. INCORPORATE THE PATIENT'S PERSPECTIVE

- Relate explanation to the patient's ideas, concerns and expectations

You said you were worried the pain was angina...

- Respond to non-verbal cues

You look worried

- Allow opportunity for patients to contribute



#4. SHARED DECISION MAKING AND PLANNING

- Share your thinking/offer suggestions & choices

I think that there are two options that we should discuss

- Encourage patient to contribute their ideas

What are your thoughts on this?

- Explore options with the patient
- Establish the patient's preferences

What matters most to you?

- Negotiate the plan

Now that we had a chance to discuss your treatment options, which treatment do you think is right for you?

- Check with the patient

Can I just check you are happy with this plan?

Find out more: www.hse.ie/nhcprogramme



Communication skills

for **Closing the Consultation**

#1. FORWARD PLAN

Next steps

- Agree next steps for you and for the patient
- Emphasise support

"We are here to support you if you want to talk some more"

i Safety-netting

- Discuss what to do if the plan is not working, when and how to seek help
- Be clear on where the patient can find information
- Offer written summary, instructions or notes

#2. ENSURE APPROPRIATE POINT OF CLOSURE



Summarise

- Briefly summarise what was discussed
"So just to review, we talked about..."
- Clarify plan of care



Final check

- Check that the patient agrees and is comfortable with the plan
- Ask for any additional questions
- Ask the patient to tell you the most important things they will take from the consultation

*Before you leave, let's recap.
What are the main things you
are going to do to manage
your asthma at home?*



Observe the patient's non verbals to judge if the patient appears ready to finish the consultation

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Communication skills

for **Providing Structure**



#1 MAKE ORGANISATION OVERT

- Agree the agenda
"First I want to find out... and then I want us to talk about..."
- Summarise throughout
"So your appetite has not been the same and..."
- Signpost
"Ok, so now let's talk about..."
- Clarify for family members how consultation will proceed
"What I would like to do is hear from your mum and then you can tell me what has been worrying you"



#2 ATTEND TO FLOW

- Apply a logical structure to the consultation
- Keep to time

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