

Communication Skills for Responding to Strong Emotions



Click link above to play video

Note on using this video

Read the background information to gain an understanding of the scenario context. On watching the video, you might feel that while many of the skills are good, perhaps there are some that you might do differently. To support your thinking on this, the communication skills sheet overleaf includes some examples of different wording.

As in any acted version of a healthcare conversation, you will notice that the video does not capture the full nuance of real-life communication. Instead, it highlights in a simplified, sometimes repeated manner, skills that are known to make healthcare conversations easier and more effective. The intention is not to teach skills 'by rote' and to learn wording by heart, but rather to help engage viewers in reflecting on what they communicate and how they do so.

The video includes multiple phases and skills. If you are using it in a teaching session, It can be useful to think in advance about particular skills you want learners to look out for.

Supporting materials

Visit our webpage at https://bit.ly/NHCP_MODULE_3_WEBPAGE for supporting materials on communication skills for responding to strong emotions.

Communication Skills for Responding to Strong Emotions

Background

Mark and Yvonne are parents of 9 year old Riona. Riona has nausea, loss of appetite, stomach-ache, and a raised temperature. Her parents brought her to the duty GP who referred her to the emergency department. They have been waiting for nine hours, the emergency department is busy and noisy, Riona's parents are becoming more and more concerned and angry. They immediately raise this on Dr Tayyaba Ishtiaq, is one of the Emergency Medicine doctors, and she has just arrived to see Riona.

Clips

There are three clips in this scenario.

FIRST CLIP

INITIATE THE CONVERSATION

00:00 – 01:19

Tayyaba uses good communication skills to build rapport with Yvonne, Mark and Riona.

SECOND CLIP

GATHER INFORMATION

01:20 – 04:33

Tayyaba uses good communication skills to continue to build and strengthen rapport with Yvonne and Mark and create an environment that encourages them to talk about their concerns.

THIRD CLIP

GIVE INFORMATION

04:34 – END

Tayyaba agrees next steps with Mark, Yvonne and Riona and emphasises support.

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Communication Skills

FIRST CLIP

INITIATE THE CONVERSATION

00:00 – 01:19

In this clip, Tayyaba gets the conversation off to a good start with Yvonne, Mark and Riona.

- Tayyaba starts the conversation with a warm greeting (“Hi there”), identifies herself by name and establishes her role (“My name is Dr Tayyaba Ishtiaq, I am one of the emergency medicine doctors. Please call me Tayyaba...”).
- Tayyaba makes a connection with Riona by greeting her and checking her name (“And you must be Riona? Hi Riona?”) and checking in with Mark and Yvonne (“And you are Riona’s mother and father?”).
- Tayyaba encourages Yvonne and Mark to voice their concerns using positive nonverbals (eye contact, leaning, nodding, warm facial expression), and listening in silence, without interruption, and without attempts to dispute, giving Yvonne and Mark time and space to tell their story. Her facial expression and body language implies a caring and compassionate approach.
- Tayyaba expresses appreciation and involves the couple in the conversation (“Thank you both very much for coming along today, and for sending in the letter...”).
- Tayyaba acknowledges and apologises for any distress caused by the length of time that the family have been waiting in the emergency department, (“I’m so sorry that you’ve been waiting for so long...”).

An additional skill would be to pick up on Mark’s comment he knows they are busy, building agreement and affiliation with something like ‘You’re right, we are very busy today.’

- She listens to their response and again apologises (“I am really sorry to hear that you’ve been waiting for 9 hours... you must all be really tired”).
- Tayyaba empathises with Yvonne (“I can see that you’ve had a bad experience”) and pauses to allow Mark time to express his concerns.

SECOND CLIP

GATHER INFORMATION

01:20 – 04:33

- Tayyaba empathises with Yvonne and Mark (“I can see that you’re really annoyed”) and validates their feelings (“you must be quite worried about Riona as well”). She acknowledges again that they have had to wait (“You have been here a long time”) and uses their names (Yvonne and Mark) to build connection.
- Tayyaba then sets the agenda for this part of the conversation (“My job now is to find out what is wrong with Riona...”), and thus works to focus this part of the consultation on dealing with their concerns (“...and get her the treatment she needs”).
- Tayyaba structures the conversation for Yvonne and Mark by sharing her thinking and using signposting (“Just before we start, did you have anything to eat or drink?”). This clarifies for the couple how the conversation will proceed and promotes affiliation with Yvonne and Mark.

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- Mark and Yvonne respond by talking about how worried Riona’s grandparents are and we can see within this clip Tayyaba responding to their emotions in several ways – noticeably her open body posture and positioning, eye contact, nodding and remaining silent while they are speaking and demonstrating empathy, (“*Your mum must be quite worried about you and about Riona as well...*”). She validates their emotions by acknowledging that this has been a difficult experience for them... (“*It sounds like it has been a very tough and stressful time for all of you...*”).
- Noticeably, whilst Tayyaba builds affiliation by acknowledging that, and agreeing with, the difficulties and distress caused by the long and noisy wait, she does not say anything that could be heard as ‘taking sides’ with the duty GP or hospital, and this avoids escalating the conversation into an argument or dispute.
- By keeping her focus on acknowledging and validating their feelings, she builds connection with Yvonne and Mark and helps them to participate in the conversation.
- Tayyaba demonstrates that she has prepared for this conversation (“*I do have the letter from the GP and I’ve read that... and I’ve talked to the nurse outside*”), this helps to build rapport and convey to the couple that she is professional, thorough, and trustworthy.
- Having listened to and acknowledged their concerns, (“*I can see that you’ve all had a very difficult time*”), and again apologising for the wait (“*I’m really sorry that you’ve had to wait here for so long... in these conditions*”), Tayyaba then moves the conversation forward, using signposting (“*This is your time with me now... is it ok if I start by asking Riona some questions... then I will come to you Yvonne and Mark?*”).
- Tayyaba begins the conversation with Riona by getting down beside the trolley so that her eyes and Riona’s eyes are at the same level and uses an open question to elicit information from Riona (“*In your own time... can you tell me what the problem is*”). This helps to build affiliation and establishes Riona as an important contributor to in the conversation.
- Tayyaba uses silence, verbal (mm-mm) and nonverbal (nodding) encouragers to giving Riona space to tell her story.
- Tayyaba demonstrates listening by summarising and reflecting back to Riona what she is hearing, in particular any statements that indicate her distress (“*Okay, so Riona what I’m hearing is... if you do eat, it’s making you feel more sick.*”). This kind of repetition can be useful because it shows that Tayyaba has heard exactly what Riona has said. It also gives Riona the opportunity to correct Tayyaba or add further information.
- She elicits further information using screening... (“*Anything else, Riona?*”) and by inviting Mark and Yvonne to add more (“*Mark, Yvonne... anything else you have noticed?*”). This helps to build affiliation and establishes them as partners in the conversation and acknowledges their role as Riona’s parents. There is one thing to note about the ‘Anything else...’ phrase. It is quite likely that you have been taught to word ‘screening questions’ with this kind of wording.

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However, we now know that **avoiding** ‘any’ can work better if you want to encourage a patient to say more. This is because ‘any’ pushes for – it’s tilted towards – the negative (for instance ‘*I don’t have any pain*’ makes sense, whereas ‘*I have any pain*’ does not). Alternatives that make it somewhat more likely that patients will respond with further questions and concerns include ‘*Are there some other things you’ve noticed?*’, ‘*Do you have other questions?*’ and ‘*Are there some other concerns?*’.

- Tayyaba invites Yvonne and Mark to tell her their main concern (“*and what is your main worry?*”), this question in conjunction with her warm tone expresses her interest and empathy. Yvonne raises the fact that a neighbour’s child recently needed surgery for appendicitis.
- Tayyaba provides ongoing cues throughout the interaction that she is listening, (“*Ok*” and “*Mm-mm*”, maintaining eye-contact, nodding and leaning), her tone of voice and body language imply an interested and caring attitude. These skills enable her to encourage Riona and her parents to tell their story and share their concerns.
- Tayyaba validates what Mark and Yvonne are feeling (“*that must have been quite a worry for you...*” – as an alternative, she could say something like ‘*So it’s normal that you’d be worried this could happen to Riona*’), this enables her to convey that their concerns and feelings of worry in relation to Riona are reasonable, and this gives them permission to express their worries and concerns.

THIRD CLIP

GIVE INFORMATION

04:34 – END

- Tayyaba begins this part of the conversation by outlining the next steps... (“*So what I would like to do next is...* ”).
- Tayyaba organises the information into chunks (“*after that, we will take Riona down for an ultrasound scan*”), avoiding or explaining jargon, pausing after giving the chunks and waiting to see if Yvonne or Mark have any questions about the information before giving the next chunk. This helps her to ensure that key points are covered and helps Riona, Yvonne and Mark to take in the information.