Communication

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Why ‘good’ communication?

- Because that is what we would want
- Docs who educate, encourage dialogue, & laugh get less formal complaints
- Canadian MJ 2006 Bismarck et al; Of 154 injured patients whose complaints were sufficiently detailed to allow coding, 50% sought corrective action to prevent similar harm to future patients (45% system change, 6% review of involved clinician's competence) and 40% wanted more satisfying communication (34% explanation, 10% apology).

Associations

- Openness and mutual trust
- Listen and offer options
- Be accessible and respect privacy
- Respect their right to disagree with you
- All info in the relationship is confidential
- It is their info so offer it to them
- But try and help them understand it too!
- Guidelines and brochures
- Under-16s also have rights- best interests
- Be considerate to rellies and support people
- Do not discriminate
- Referrals, discharges, handovers & documents

Interpersonal Skills

- Listening, understanding, talking
- Non-verbal communication
- How you say things changes them!
- Written communication, courtesy

1. Listening

- Average speech 160 wpm
- Average thoughts 675 wpm
- Keep eye contact nod and shut up
- Summarise what they said
- Make notes
- Better info = saves time
- Remember they can and do waffle

2. Speaking

- Think before mouth in gear
- Look at the listener not the floor or out the window
- Clearly and loud enough
- Inflection inc pitch or tone What am I doing?
- Use appropriate humour and anecdotes
- Commonality?
- Document!

3. Record Keeping (writing)

- Write legibly; concise & relevant better than long-winded and indecipherable.
- Include the date and time; may come to light years later.
- Sign and print your name at every entry.
- Avoid abbreviations e.g. PID, LAP, AMA, FLK, NFB, TTFO ESAD.
- Do not ‘doctor’ notes! ‘still holds bottle’ was found to be ‘silly old bat’.
- Avoid personal comments.
- If you amend things write ‘retrospective note and date etc’
- Check your letters as they may not read as you thought.
- Copy letters to patients?

4. Nonverbal Communication

- Attentiveness- eyes, face, relaxed, nod, touch
- Voice- clear, audible
- Move and dance
- Give time for them to think and answer
- Look at the time secretly if you have to
- The desk
- The seating position

Barriers to Good Communication

- Language
- Jargon
- Front of house; people and place
- Patient anxiety
- Noise and interuptions
- Personality dysfunction either way

Other Issues

- All patients are equal public=private.
- Stress and anxiety makes one crazy.
- You can’t please everyone.
- But winding them up is short term gain only.
- Yes it is frustrating when ‘they’ can make very insulting comments.

Thank you.

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