One patient’s story highlights the importance of nurses and staff communicating effectively, and how poor communication can have a negative impact on patients

### Communication and the 6Cs: the patient experience

**In this article...**
- One patient’s experience of nursing care in a hospital setting
- Examples of poor communication skills
- What to be aware of when communicating with patients

**Author** Christopher Barber is full-time informal care giver and part-time associate lecturer (learning disability nursing), Birmingham City University.

**Abstract** Barber C (2016) Communication and the 6Cs: the patient experience. *Nursing Times;* 112: online issue 1, 4-5.

The quality of patients’ experience in hospital is an issue in healthcare. In 2010 the coalition government made a commitment to put patients at the heart of all the NHS does to improve their experience of care (Department of Health, 2010). This article highlights the experiences of a patient with complex needs and how poor communication can have a negative impact on patients.

**The patient experience**

Mrs Windsor was in her late 50s, had cerebral palsy, sleep apnoea and myasthenia gravis (a neuromuscular condition that leads to fluctuating muscle weakness and fatigue). She was taking medication (pyridostigmine) for this condition and was admitted on to the ward with atrial fibrillation. As a result of her disabilities and complex needs she has an advance directive not to undergo resuscitation in the event of a stroke or heart attack.

Mrs Windsor experienced frequent communication issues during her stay on the ward, including a lack of communication between ward staff on opposite shifts and between ward staff and herself. She was able to make her preferences known using her understanding of the 6Cs. Her story highlights the importance of nurses and staff communicating effectively, and how poor communication can have a negative impact on patients.

**Box 1. THE 6CS**
- Care
- Compassion
- Courage
- Communication
- Commitment
- Competence

**Source:** Cummings and Bennett (2012)
Discussion

Mrs Windsor's experience illustrates the importance of communication issues having a real effect on patients' experiences. The NMC Code makes explicit nurses' responsibilities to listen to patients' concerns and give treatment in a timely manner (Box 2).

For effective interaction and engagement with both the patient and the person behind that label, communication is vital. Care may be compromised if nurses do not communicate well. Such communication must involve:

- Listening to what patients say;
- Answering their questions in ways they can understand and process;
- Relaying information from patients to colleagues, and vice versa.

Mrs Windsor's experience illustrates how communication issues have a real effect on patients' experiences. The NMC Code makes explicit nurses' responsibilities to listen to patients' concerns and give treatment in a timely manner (Box 2).

For the ability to listen and communicate, delivering the 6Cs and meeting the requirements of the Code would, at best, be "watered down" and compromised and, at worst, may not be internalised and made real or concrete. This is illustrated by the failure of staff to acknowledge the importance of Mrs Windsor's advance directive and pass the information on to the team. Mrs Windsor had to repeat her wish not to be resuscitated, which suggests individual nurses and the nursing team were not able to understand her wishes as such, their competence in meeting her care needs were compromised.

The ongoing communication issues around the timing of drug administration and the information given in the anticoagulant clinic resulted in a lack of confidence in the staff's ability to provide compassionate and competent care.

The Agency for Healthcare Research and Quality (2004) highlighted the importance of health literacy, and the need for information to be tailored to the right level for an individual's needs. Health Literacy (2016) note that "Health information in current circulation is written at too complex a level for 43% of working-age adults (16-65 years)" and this figure rises to 61% if the health information includes numeracy.

Given Mrs Windsor's potential vulnerability due to her complex healthcare needs, the nurse in the anticoagulant clinic should first have assessed her communication needs, then amended her approach accordingly. Without this, Mrs Windsor's ability to give informed consent was compromised.

Conclusion

The 6Cs are likely to have a crucial impact on how patients and service users experience nursing care for many years to come, with communication being pivotal to this experience. The importance of communication is also emphasised in the NMC Code, which should be used to guide nurses' day-to-day practice. They have an obligation to listen to patients' concerns about communication and reflect and consider how they interact and engage with them.

References


For more on this topic go online...

- For information and support on revalidation
  Bits.ly/NTRevalidation