Communication skills 1: benefits of effective communication for patients

It is estimated that the cost of poor communication to the NHS is over £1bn per year, and can lead to poor adherence to medication regimens, repeat visits to clinics, disputes and ultimately litigation (McDonald, 2016). Effective communication can:

- Enhance the patient experience;
- Reduce complaints;
- Increase nurses’ self-confidence, professional standing, career prospects and job satisfaction and reduce stress.

Jones (2010) suggests that patients are less likely to remember technological interventions than the communication and human interaction from health professionals and judge the quality of their care by these markers. They have more confidence in health professionals who communicate effectively, which in turn makes it more likely that treatment regimens are followed or advice taken.

Effects of poor communication

Communication is defined as imparting or exchanging information, thoughts or ideas using speech, writing, or some other medium such as signals or behaviour. Effective communication protects patients from potential harm arising from misunderstandings. While communication failures leading to serious harm - such as the wrong leg being amputated - are rare, even minor shortcomings can have serious repercussions. For example, communication errors between colleagues can result in nurses giving the wrong medication, or patients taking an incorrect dose of the right one. Poor communication in an end-of-shift handover can result in patient harm if important information is not passed from one professional to another.

Although no nurse would set out with the intention of communicating poorly, not everyone can be a good communicator at all times. The Care Quality Commission’s 2016 Inpatient Survey asked patients whether they received an answer they could understand when asking a nurse an important question: 70% replied “yes, always”, an increase of four points since the 2006 and 2011 surveys, but a decrease of one percentage point from 2015 (CQC, 2017). Almost a third of patients did not understand nurses’ explanations some or all the time. Communication with patients can go wrong for a variety of reasons; Fig 1 illustrates typical factors that can have a negative effect on communication (see part 2).

Box 1. Seeing the patient behind the task

“A hospital nurse told me she needed to take my blood pressure. She duly recorded the results in my notes. Job done? No. She did not tell me the result, whether it was normal, or why it was necessary. It didn’t occur to her that I might be relieved to hear: ‘Your blood pressure has returned to the normal range’. What the nurse regarded as a task to be completed was an opportunity to reassure a worried patient.”

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Abstract Effective communication protects patients from potential harm arising from misunderstandings, and can have a positive effect on staff. This first article in a six-part series on communication discusses the benefits of effective communication and offers practical tips on how to reflect on your communication skills.

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Understanding patients’ needs
Communication failure, such as failing to introduce oneself, can occur when staff regard patients as a series of symptoms and tasks rather than as people with social and emotional needs; this can leave patients feeling dehumanised, while simple positive actions such as an explanation can have huge beneficial effects (see case study in Box 1).

Patients sometimes selectively process information, hear only what they want to hear, and subconsciously reframe or oversimplify a message if they do not like its content. If your message is not interpreted as planned, understanding where it went wrong and why can help you to rephrase it so it is understood.

‘Teach-back’ is a useful technique to check patients’ understanding by asking them to summarise a message they have been given in their own words; in doing this you are checking your capacity to communicate, not the patient’s ability to understand. It is important to put yourself in your patient’s shoes and anticipate how your message may be received. Try to imagine how you, or someone close to you, might react and how the addition of a few reassuring words may prevent needless worry for patients.

Coping with anxiety
It is natural to be nervous when having difficult conversations with patients or their relatives. However, nervousness can have an adverse effect on communication, so you may forget to introduce yourself or maintain appropriate eye contact; or it may cause you to blush, stutter or frown – all of which will interfere with effective communication. Do not allow excessive nervousness to destroy your confidence in yourself or patients’ confidence in you. If you are nervous about a conversation with a patient or relative remember to:
- Identify what you need to tell the patient and the aim of the conversation;
- Take deep breaths before approaching the patient;
- Pay attention to your body language;
- Mentally rehearse your opening words – being fluent will put the patient at ease from the outset.

Reflecting on the conversation afterwards using the communication checklist in Box 2 is also helpful to improve your skills and confidence.

Reflection
Activity
Think about a recent shift and your interaction with patients and use Box 2 to reflect on how you communicated with them. Identify scenarios where you communicated well and those where you need to improve. Become conscious of your communication style and analyse your strengths and weaknesses. Discuss these with your mentor or manager and identify your learning needs.

Conclusion
By spending a little time reflecting on how you communicate, and working at improving any weak areas, you can reap the many personal rewards of being an effective communicator – including a better patient experience for those in your care. The second article of this series will explore the barriers to communication in more detail. NT