Communication in Healthcare
Recognition to American Academy on Communication in Healthcare (AACH) and Mayo Clinic for collaboration on program development.
Communication: Who Needs It?
Communicating Effectively

Communication skills are essential to:
- Physician-patient relationship
- Daily interpersonal contact

“Art of medicine”
- Hard science demonstrating clinical outcome benefits
Physician Perspective on Communication

- 250,000 patient encounters during our professional lifetime
- 25% of these encounters are often described as frustrating
- 50% of these encounters can be described as dysfunctional or difficult by some specialties
Physicisn Perspective on Communication: Why?

 ✓ Physicians often feel:
   – Poorly equipped to deal with the many demands placed on them
   – The behaviour and personalities of certain patients often strain inadequate skills
   – Personal, social, and cultural “baggage” often interfere with communication
Patient Perspective on Communication

- **80%** feel their doctors are too busy to listen to their complaints
- **27%** state their primary care physician failed to address their main concern
- **32%** state that their sub-specialist failed to address their main concern
But We Are the University of Florida College of Medicine-Jacksonville
Patient Satisfaction Survey
Staff Satisfaction Survey
The Evidence for Better Communication Skills

✓ Increased patient satisfaction
✓ Increased adherence to treatment plans
✓ More appropriate medical decisions
✓ Decreased malpractice claims
✓ Increased physician and allied health job satisfaction

Suarez-Almazor ME. *Current Opinion in Rheumatology.* 16(2):91-5, 2004 Mar.
The Skill of Reflective Listening

✓ Excellent starting point for beginning a dialogue with a complex patient.
  – Attitude: curious, non-judgmental, seek to understand the patient’s perspective
  – Skill: Ask open ended questions and actively listen.

✓ This attitude will often take the patient by surprise.
An exercise to demonstrate reflective—and hopefully active—listening

Pair off in groups of two

Alternate Speaking and Listening roles – 3 minutes each
Skills Workshop: Reflective Listening

- **Speaking task:** Share with your partner a “stepping stone”.

- A stepping stone represents a major, direction changing event in your life. *It may be a person, event, or experience.*
Skills Workshop: Reflective Listening

- **Listening task:** Listen actively but quietly without interrupting or interjecting your opinions.

- Try to focus completely on what your partner is saying, rather than to your internal thoughts.

- When your partner finishes, summarize or paraphrase what they told you using their words as much as possible.
The Patient Centered Interview

Patient Education

Relationship Building

Information Gathering
The Physician Centered Interview

✔ Traditional history-taking and interview
   - A manual of laundry lists
   - Hundreds of items pertaining to organ systems
The Physician Centered Interview

✓ On the average, physicians interrupt the patient after the patient begins to speak.

18 seconds

The Patient Centered Interview

✔ THE CLINICIAN IS THE EXPERT ON DISEASE

✔ THE PATIENT IS THE EXPERT ON HIM/HER SELF
The Patient Centered Interview

- Center on the patient’s needs
  - NOT DISEASE-CENTERED
  - NOT DOCTOR-CENTERED

- It is a **skill** that can be mastered

- Engage the patient to play a larger role

- Help the physician to manage time and improve efficiency and effectiveness
Patient: “That doctor is probably a pretty good doctor, but you can’t talk to him. He didn’t seem to want to know what I was worried about.”

Physicians who focus on the patient as well as the disease:

✔ Obtain more thorough and accurate historical data

✔ Increase patient adherence and satisfaction

✔ Set the stage for more effective patient-physician relationships

✔ Increase clinician satisfaction
The Patient Centered Interview

✔ Patients who were not interrupted *rarely* took more than *one minute* to complete their list.
The Patient Centered Interview

✔ Patients who were not interrupted *never* took more than ___three minutes___ to complete their list.
Why not interrupt?
Isn’t that how we take control?
Why not interrupt?

✓ We lose potentially relevant information:
  – We change the course of the story

✓ We jump to conclusions:
  – Premature hypothesis testing (differential diagnosis)
Why not interrupt?

✓ The degree to which patients can tell their own story affects outcomes…
  – Headaches are more likely to resolve
  – Hypertension improves

Why not interrupt?

✔ Patients need a period of uninhibited talk at the beginning of the interview to express their concerns

IT DOESN’T TAKE LONGER!
The Patient Centered Interview

Patient Education

Relationship Building

Information Gathering
Information Gathering

✓ Elicit data efficiently and accurately
✓ Seek the patient’s agenda
✓ Set the agenda jointly
✓ Negotiate priorities together
Elicit Data Efficiently and Accurately
- Patients want to give information about their concerns.
- Begin with a comprehensive inquiry about the patient’s entire list of concerns before collecting details on any one complaint.
- This ultimately saves time and assures focus on key issues.
Information Gathering: Seek the Patient’s Concerns

✔ When?
  – At the beginning of the visit

✔ How?
  – Comprehensive “What Else?”
    examples...
    • “What else?”
    • “What else has concerned you lately?”
    • “Are you worried about anything else?”
    • “Anything else?”
    • “Tell me more”

✔ Why?
  – Minimizes “Oh by the way…” at the end of the visit
Example:

- I’m not certain we can cover all our concerns.
- “We agree that A is important. I also want to address B, and you expressed concern about C.
- Where should we start?”
Information Gathering: Joint Agenda Setting

✔ Patient and Physician
  – Negotiate priorities together
  – Share control
  – Establish concept of limits
When patients believe their concerns have been heard, they are more willing to accept the clinician’s recommendations.

When patients feel their concerns are not heard and not responded to, dissatisfaction and poor compliance result.
Summary: Information Gathering

✔ Facilitate:
  - “Tell me more”
  - Attentive listening
  - Echo the patient’s last few words

✔ Clarify:
  - “Help me understand what you mean by that”
  - “Let me review what I think I heard you say”
  - “I’d like to summarize so we can both be sure I have the story straight”
Skills Workshop: Information Gathering

- Each participant will have the opportunity to practice a patient interview

- Elicit patient’s entire list at the beginning of the interview

- Negotiate the agenda and set priorities
CONNECTING

The Patient Centered Interview
Question:

How do you measure the success of a patient’s experience?
Answer:

Correct diagnosis and treatment plan.
Question:

How does a patient measure the success of his/her experience?
Answer:

✔ “Correct” is key

✔ “Connect” is key

Recognize and Respond
CONNECTING
Relationship Building

✔ Recognize Patient’s Emotions:
  – anger
  – fear
  – sadness
  – anxiety
  – uncertainty

✔ Respond with “PEARLS”
CONNECTING
Relationship Building

P = PARTNERSHIP
E = EMPATHY
A = APOLOGY
R = RESPECT
L = LEGITIMIZATION
S = SUPPORT
PARTNERSHIP

☑ Patient and physician working together to correctly define the issues and solve problems jointly…

- “Let’s tackle this together.”

- “We can do this.”
EMPATHY

✔ Understand the patient’s feelings and communicate that understanding to the patient.

✔ Requires:
  – Listening
  – Wanting to understand
    • walk a mile in his/her shoes
  – Communicating…
    • “That sounds hard.”
    • “You look upset.”
  – Express understanding of how patient feels…
    • “Let me see if I have this right . . .”
Acknowledge patient’s frustrations and anxiety

Take personal responsibility and apologize when appropriate...

– “I am sorry we can’t get everything scheduled today and tomorrow. Let’s try to do the best we can.”

– “I’m sorry I was late.”
RESPECT

✔ Demonstrate appreciation/value for patient’s choices, behaviors, and special qualities…

  – “You have obviously worked hard on this.”

  – “That was tough. You handled it well.”

  – “You have obviously researched this problem quite well. Let’s see if I can add to your knowledge.”
✓ Concur that patient’s feelings and choices are appropriate…

– “Anyone would be (confused, sad, irritated) by this situation.”
Offer ongoing personal support…

- “I’ll stick with you as long as necessary.”

- “I’ll be here when/if you need me.”
SUCCESSFUL CONNECTION

✔ Patient feels alliance, safety and trust

✔ Stronger relationship to cope with stresses of illness

✔ Successful Connection = Satisfied Patient and Physician
CONNECTING

✓ **Recognize** feelings and emotions

✓ **Respond** with a supportive statement
Successful Connection = Satisfied Patient and Physician
Click to Launch
PEARLS Video
Reflective Listening

Patient Centered Interview

Agenda Setting

Connecting

PEARLS

Exhaustive “what else”

Reflective Listening

Communication Tool Box