

Gold standard strategies to communicate with emotional competence with patients and colleagues



*Seeing what works,
stepping back and taking
action*

Follow-up course

Kilifi, Kenya

Ane Haaland, Mwanamvua Boga,

All trainers

All participants

Referencing and acknowledging the iCARE-Haaland model

- *Please feel free to use and adapt the material in this presentation, and the model it is built on, by referring to the model, and the authors:*
- This presentation is adapted from «**Gold standard strategies to communicate with emotional competence with patients and colleagues**», which is part of the learning materials in the iCARE-Haaland model.
- **To reference this content please use the following:** Haaland A, with Boga M, 2020. Communicating with awareness and emotional competence: introducing the iCARE-Haaland model for health professionals across cultures. With contributions from training teams, Vicki Marsh and Sassy Molyneux
- <https://connect.tghn.org/training/icare-haaland-model/>
- The authors' names should remain on the presentation, with a by line recognizing the person who (has adapted and) is presenting the presentation

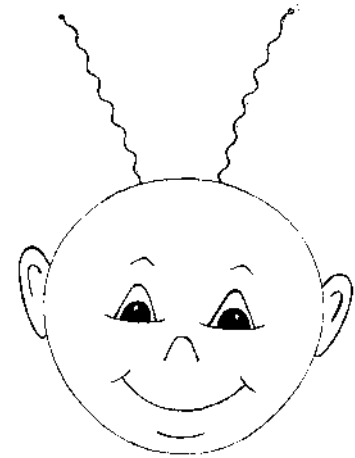
Objectives

- **Strengthen awareness and skills:**
- Review our "toolbox" of effective communication strategies to:
 - Understand
 - Advise
 - Focus on common goal
- Review how to stop automatic reactions
 - Refresh skills to step back
- Recognise when you take things personally – step back



How to become a **good communicator**

- Effective interpersonal **communication skills**:
 - basis for good work in strategic communication
- To **master skills**, you need:
 - continued awareness,
 - focus on success, and
 - practice with feedback
- Understand that **People Act** –
 - because of ***emotional issues***,
 - NOT on cognitive understanding alone
- ***Understanding effect on receiver is key***



How have you *continued to learn* after the course?

- *“I’m putting the course skills into use everyday at work and they really work.”*
- *“Discussing and sharing situations with colleagues”*
- *“Practicing majorly, being aware of my actions through observing myself , asking for comments on how I communicate”*

The **basket** of skills



The situation

- Kahindi has been on ARVs for a year, and taking his medicines regularly. He has been a good patient. Now he has developed a rash which really bothers him, and he has trouble working (as a clerk).
- He always has to scratch himself, also in private places. He is embarrassed about this. He has trouble sleeping, as is afraid his wife will leave him.
- He is grumpy, and quite desperate. He is rude.
- He stopped ARVs a week ago, and seems determined to not go back.
- He needs to keep his job, as his family depends on him

Demonstration: Kahindi won't take medicine



Why did Kahindi not take the provider's advice?

Discuss in groups:

- What were the provider's goals with "Kahindi"?
- What were the reasons s/he did not reach the goals?
- Whose feelings and needs did s/he take care of? How?



How would you communicate to encourage «Kahindi» to take your advice?



Discuss: How would you do it differently?

- What will be your goal?
- Develop a communication strategy to reach your goal.
- Tell us why you think your strategy will work
- *Prepare to act your strategy with "Kahindi"*

Demonstration by participants: **The Gold Standard?**

- What was your goal?
- What skills did you use to deal with this patient?
- What were his/her concerns?
- Why does your communication strategy work well?



Skills used in example



1. Recognize emotions - Take a step back

- Recognize and stop your automatic reaction
- *Be aware of your intent:*
- Keep focus on **patient's needs**
- Don't take his grumpy mood personally

Why is this important?

Skills used in example

2. Create a conducive atmosphere:

Greet the patient

- **Create rapport** – to build trust and establish relationship w/patient
 - **Build confidence** of my patient, to be open
 - **Respect and empathize** with my patient
-
- ***Why is this important?***



Effects of practicing respect



On the Patient

- Develops trust
- Feels valued and appreciated
- Higher likelihood of compliance with care

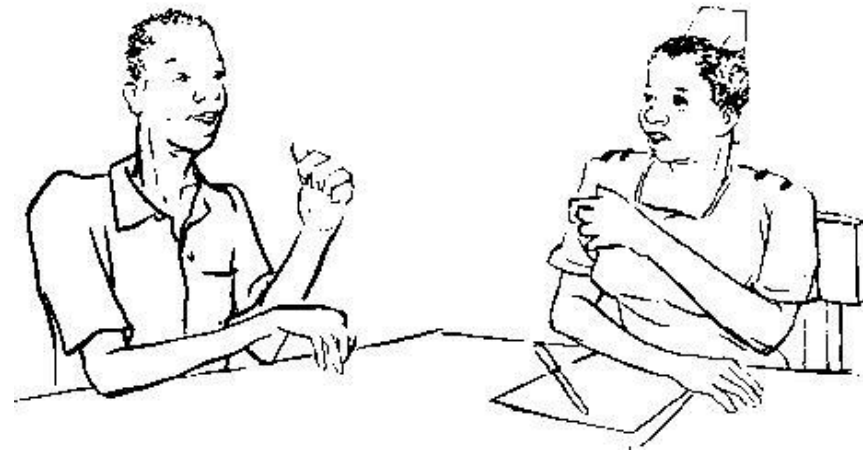
On the Provider

- Higher chances of reaching common goals with patient
- Confidence in skills is strengthened
- Contributes to job satisfaction
- Helps to prevent burnout

Skills used in example

3. Listen with empathy – and with the intention to understand the patient

- Appreciate that he has taken his drugs well till now
- Encourage him, with empathy
- Observe and recognize patient's emotions (e.g. vulnerability); deal with them respectfully – with empathy



Why is this important?

Skills used in example

4. *Ask questions to clarify issues -*

- - To understand the experiences and *intention* of my patient
- Give opportunity to the patient to ask questions
- Aim towards a common goal



Why is this important?

Skills used in example

5. *Avoid rushing to explain your view*

- Try to understand the patient's perception first
- To make sure you have understood, try to recap his general perception
- Ask for confirmation, or corrections/adjustment

Why is this important?



Participant example

- *“Nowadays I don’t rush to tell them , I let them explain their version of how they have understood their state or condition , the prognosis, the disease state at that point and their expectations , then I give them the knowledge in the easiest way, find out how they feel and if there is any gaps we need to talk about regarding the patients best interest”*

Skills used in example

6. *Encourage positive ideas*

- Appreciate and encourage
- Rectify negative ideas /wrong info – in a gentle, non-judgmental way

Why is this important?



Skills used in example



7. Sum up what you have agreed

- Ask for confirmation, or further questions

Summary: Why does this communication work well?

Makes patient feel:

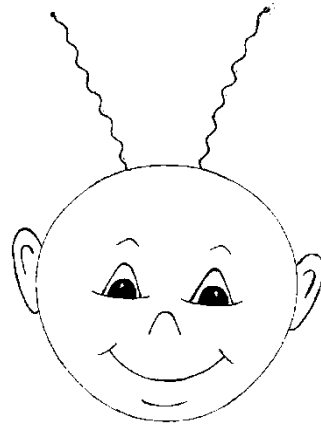
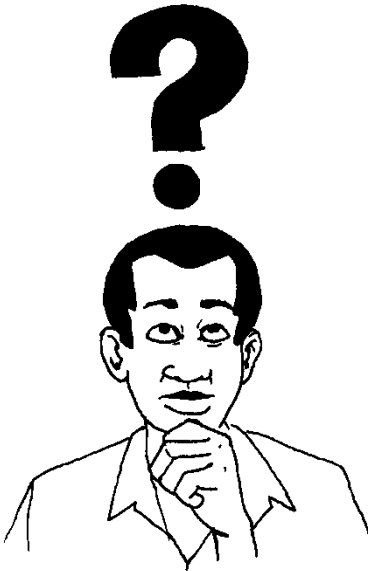
- Safe
- Valued as a person
- Respected
- That what s/he has to say, is important
- Free to ask about his concerns



Buzz:

- *What is the likely effect on following your advice, and on adherence to treatment?*
- *How do you feel as a provider after interaction?*

Key ingredients to build strategy to Communicate with emotional competence



- ***Recognize emotions:***
Feelings involved?
(Yours? His/hers?)
- ***Step back – analyze:***
What is the problem?
What are reasons for
problems?
- ***Reflect, and Decide***
on action

Reflection:

Which skills do you handle well?

- In pairs, reflect on the 7 skills the «good provider» used with Kahindi:



- Which ones do you now handle well?
- Which ones do you still need to practice more?



- 1. Recognize emotions -Take a step back***
- 2. Create a conducive atmosphere***
- 3. Listen politely: encourage the patient – with empathy***
- 4. Ask questions to clarify issues***
- 5. Avoid rushing to explain your view***
- 6. Encourage positive ideas***
- 7. Sum up what you have agreed***

Perspective on using our toolbox:
**Overall attitudes to care
and to patients learning**

How to educate patients well

Two main perspectives:

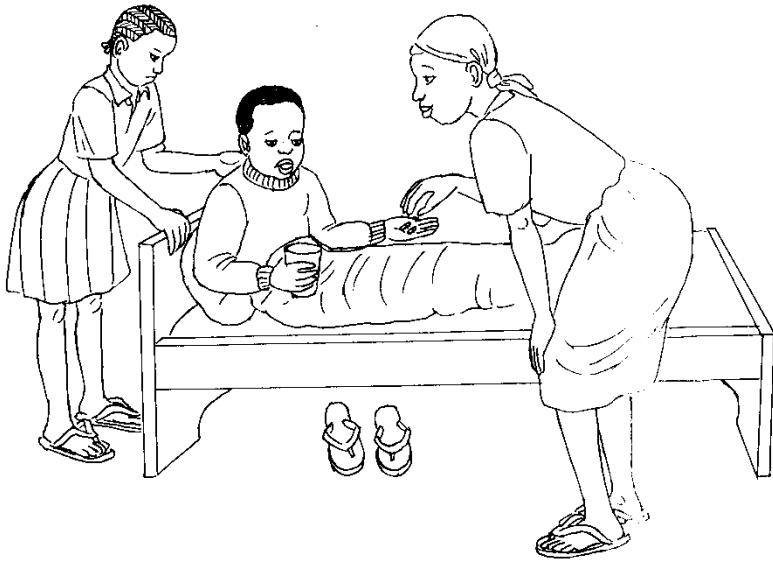
- **Medical experts –**
KNOW what to do

Influenced by

- Medical Ethics
- Drug Regulations
- Commercial interests
- Medical and cultural hierachy



Consumers or patients: **DECIDE** what to do

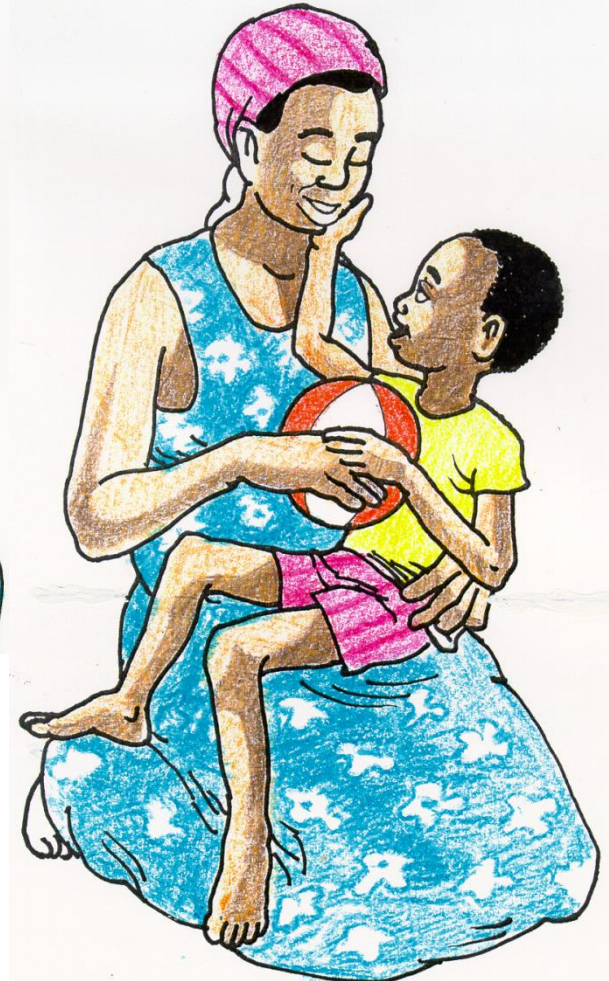


Influenced by:

- Perceived severity of the problem
- Own experience

- Money/resources
- Friends and family
- Culture + traditions

Different perspectives – same goal: **Cure**



How can you help reach the goal effectively?

Understanding and practicing Humanistic medicine, and Patient Centered Care

- **The core of humanistic medicine:**
 - holistic healing,
 - treating not only the body but
 - acknowledging the soul (and emotions) as well
- **Humanistic medicine attempts to**
 - complement physical recovery by
 - Emotionally connecting with patients
 - through **empathy, patience, and compassion**



How do you use **PCC** in practice?



Discuss in groups:

- **How have you used** PCC in your practice with patients?
- **Share experiences** of when you used PCC:
 - What did you do, that made it PCC?
- **What was the effect** –
 - On the patient?
 - On you?

Providers who practice PCC Communicate better with patients

Patient Centered Care providers -

- Use more **empathy**
- Treat with **respect**
- Use **open questioning**
- Are **less authoritarian** - encourage patients to voice their feelings and concerns
- Are interested in **psycho-social aspect** of illness
- Are ***caring as well as curing***



Effect: Patients feel at ease and are encouraged to talk freely, hence more likely to disclose the real reason for consulting. Can be empowered

Research shows:

Patients want patient centred care which:

- Explores patients' **main reason** for the visit, **concerns, and need for information**
- Seeks an integrated understanding of the **patients' world** (whole person, emotional needs, life issues)
- Finds common ground on what the problem is and **mutually agrees on management**
- Enhances **prevention and health promotion**
- Enhances the continuing **relationship** between the patient and the doctor.



Little P, et al Everitt H, Williamson I, Warner G, Moore M, Gould C, et al. Preferences of patients for patient centred approach to consultation in primary care: observational study. *BMJ* 2001;322:46872.

Tool box: Skills to understand

Info and communication – different effect on receiver:

Dialogue and Feedback is key



B: INFORMATION

A ONE WAY PROCESS



IDEA MAY BE DISTORTED. NO WAY OF FINDING OUT



THE SENDER-RECEIVER MODEL OF COMMUNICATION



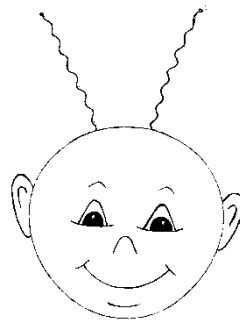
NEED FEEDBACK TO ENSURE CORRECT IDEA IS UNDERSTOOD BY 'R'.

Tool box: Skills to understand

Observe with eyes, ears, heart



- Is the patient *worried*?
- *Scared*?
- Has *pain*?
- *Uncomfortable*?
- How does this make *YOU feel*?
- *Do you RE-act, automatically?*

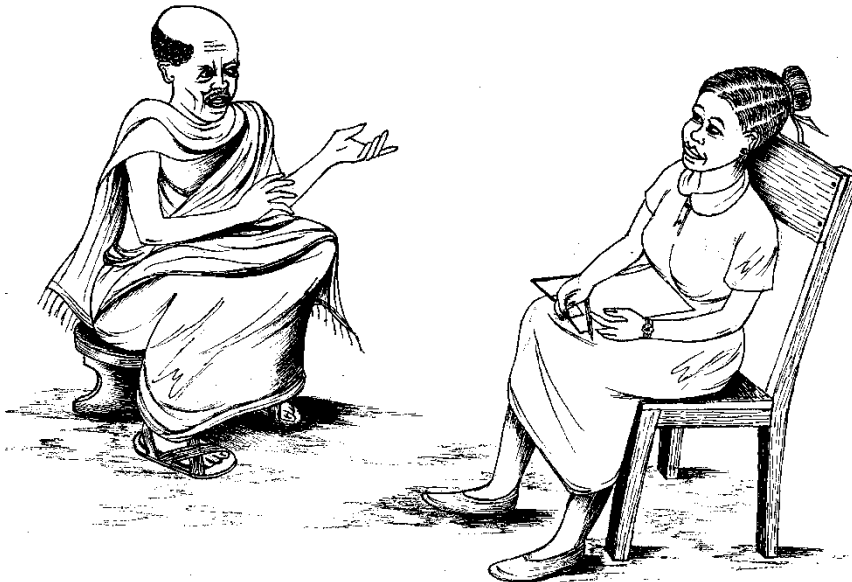


Tool box: Skills to understand

Use open questions and active listening



- Ask ***open questions*** to find more info
- Ask to find ***intention*** of the other person

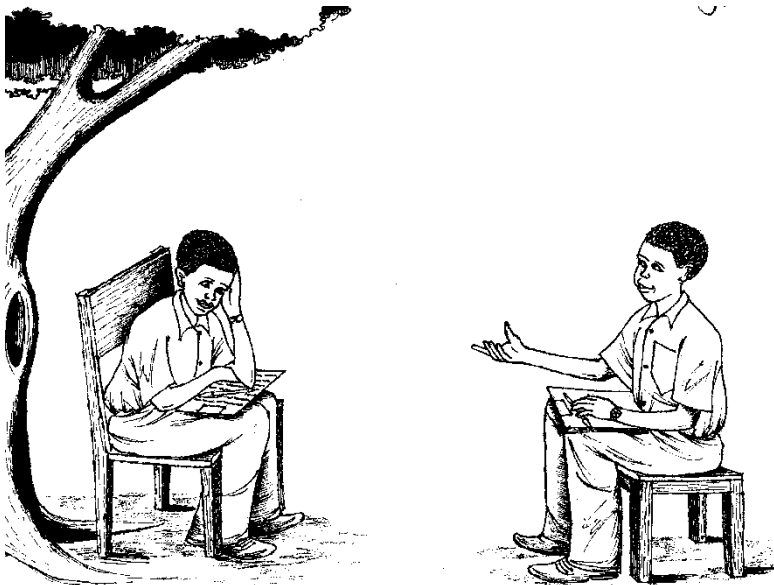


- ***Listen actively*** to make the person feel you care
- Listen, to make him feel ***valued***
- ***Do not judge***, or interrupt

Feedback must be constructive



- **Constructive feedback** makes person able to learn, and take action to change
- Start positive
- Be specific, and constructive



- **Destructive criticism** shows you are better than him/her
- Makes person feel bad, need to protect
- Person is passive, does not take action

Tool box: Skills to understand

Empathy



Discuss:

- What makes it difficult to show empathy?
- How do you do it well?
- Show it

Acknowledge what you can *see*
rather than
telling that you *understand*

“I can see that your child is very sick, we will do our best towards getting him well”

Being empathetic: What you do

- *“Showing concern/ being with the patient.*
- *“I listen actively to the patient’s concerns, being non-judgemental.”*
- *“Ask conscious questions (open questions) to avoid being analytical or triggering an emotional reaction.”*
- *“Demonstrating good non-verbal communication skills – nodding in agreement, eye contact, paraphrasing and probing”.*
- *“I give the patient enough time to express their concerns and ask all questions or fear, valuing and respecting their opinions then give a constructive feedback on areas to improve/take action.”*

Tool box: Skills to understand

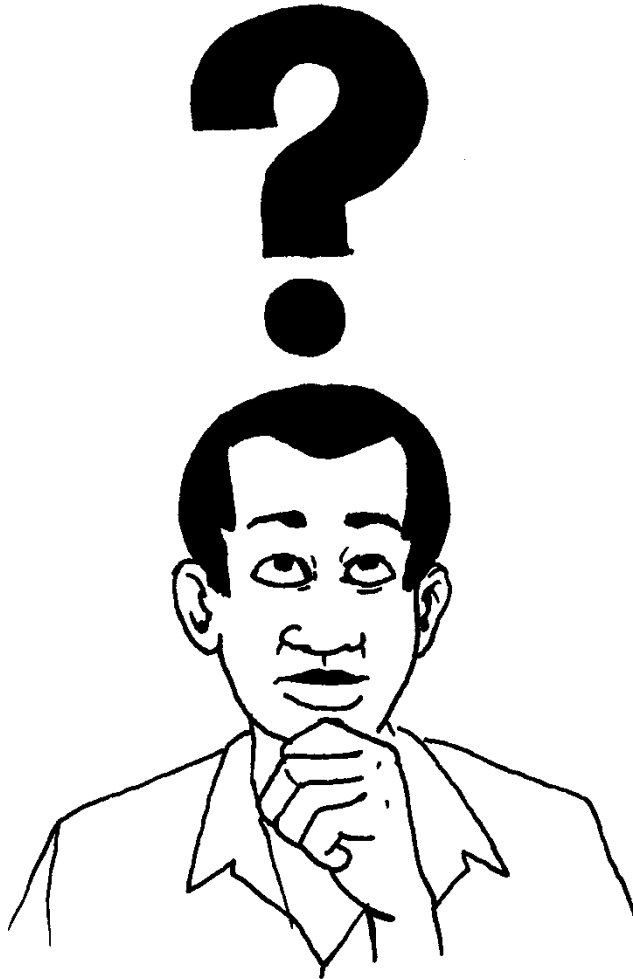
Empathy

- Share experiences where it was difficult for you to show empathy.
- What makes it difficult to show empathy?



Tool box: skills to choose right action

Selecting strategy to communicate with emotional competence



- Having understood the situation –
- *what is your goal?*
- How do you reach it?

Tool box: skills to choose right action

How do adults learn best?



People learn from each other, through dialogue with people they identify with, and respect. Need to feel safe

Tool box: Skills to understand and advise

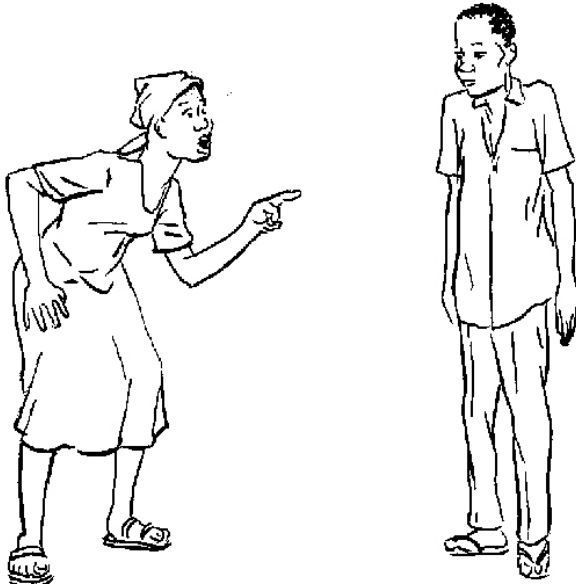
Focus: On the patient

- **For provider to educate and empower the patient well:**
 - Feels safe in her/himself
 - Feels safe in the situation
- **This enables her to use skills to**
 - Understand needs of patient
 - Focus on the effect of the communication on the patient
 - ***Provide Patient Centred Care***
- **Awareness**, skills and experience comes with practice, and feedback
- **Colleagues:** help each other learn



Tool box: Skills to understand and advise

Take care of feelings first



- Insecure, afraid, in pain:
 - **Will not listen**
 - **Will not learn**
- Attention: on feelings
- Will not remember info



Calm first

- Then teach

Tool box: Skills to understand and advise

Avoid categorizing patients

- "Uncooperative clients"
- "Illiterate clients"
- "Difficult patients"
- "Stubborn patients"



These kind of statements -

- *gets out the judgment in us*
- *prevents us from seeing the PERSON*
- *creates distance*
- ***Any change in how you categorize patients?***

Tool box: Skills to understand and advise

Encourage/build responsibility



You cannot change others. You can take responsibility for own change

Tool box: Skills to understand and advise:

Control non-verbal communication



Tool box: Skills to understand and advise

How to give advice effectively



Discuss: How advise parent?

- Mother with a 2 year old child
- Child diagnosed with malaria
- Put on oral antimalarial treatment: Coartem, 1x2x3
- How would you advise the mother to give this treatment at home?

***Show how you would advise,
to the group***

How to give advice effectively

- **Make it clear and simple**
 - how the drug works, how often to take it, for how long.
- Explain **WHY** this treatment
- Explain importance of finishing the treatment and **what can happen if you don't**
- Be confident, friendly and **non-judgemental**
- Be **practical** - if possible **demonstrate** how to measure and administer dose
- Ask patient to **repeat instructions**, to check for understanding



Tool box: understanding barriers

Patient, provider, environment



What disturbs communication?

- **Attitude:** Indifference, no respect
- Judgement
- Criticism
- Stress/hurry
- Patient not feeling free
- Swallowing your reactions



Tool box: understanding barriers

What disturbs communication?



Tool box: understanding barriers

Not invited to ask questions

- Patients do not dare ask questions because:
 - nurses are busy
 - Don't want nurse to believe he is ignorant
 - Would like nurses to invite them to ask
 - Patients have many questions
- Nurses: *«Patients should ask if they have questions»*



Buzz: Who should take initiative?

Tool box: Understanding barriers

What disturbs communication?



Health providers are often not aware of their own emotions, and how they influence communication

Tool box: understanding barriers

What disturbs communication?



- Taking things personally
- ***Automatic reactions***

Buzz in groups of 3:

- What makes you take things personally?
- How do you react?
- What can you do differently?

Summing up:

Assessing situation and needs to choose the best communication strategy

- **Read the situation:** Listen with ears, eyes and heart (*use antennae for feelings*)
- **Assess the need** of the patient (observing, asking)
- Decide: What is your **goal**
- Choose **strategy** to reach your goal
- **Check:** Dealt with Communication barriers?



Your learning aims for the course

Continue discussing in groups of 3:

- How are you doing?
- **Reflect on your learning process** with a colleague (*be generous with yourselves!*) Use results from «Kahindi-reflection»
- What do you want to learn during these 4 days?
- **Which skill(s)** do you want to improve?
- **Why?** (what difference will it make, to whom?)

