

LaFleur Brooks' Health Unit Coordinating

7th edition

Chapter 05

Communication and Interpersonal Skills

Lesson 5.1

The Importance of Communication

1. Define the terms in the vocabulary list.
2. Explain why implementation of the electronic medical record is requiring advanced communication skills for the health unit coordinator (HUC).
3. Give instances that exemplify human needs, classify each according to Maslow's hierarchy of human needs, and give appropriate responses to meet the listed needs.

Lesson 5.1

The Importance of Communication (cont'd)

4. List four components of the communication process.
5. Interpret and apply the communication model.
6. Explain how unsuccessful communication can occur during the encoding and decoding process.
7. Discuss two types of nonverbal communication.

Expanding Communication Role for the HUC

- The health unit coordinator (HUC) is liaison among:
 - Doctor
 - Nursing staff
 - Ancillary departments
 - Visitors
 - Patients

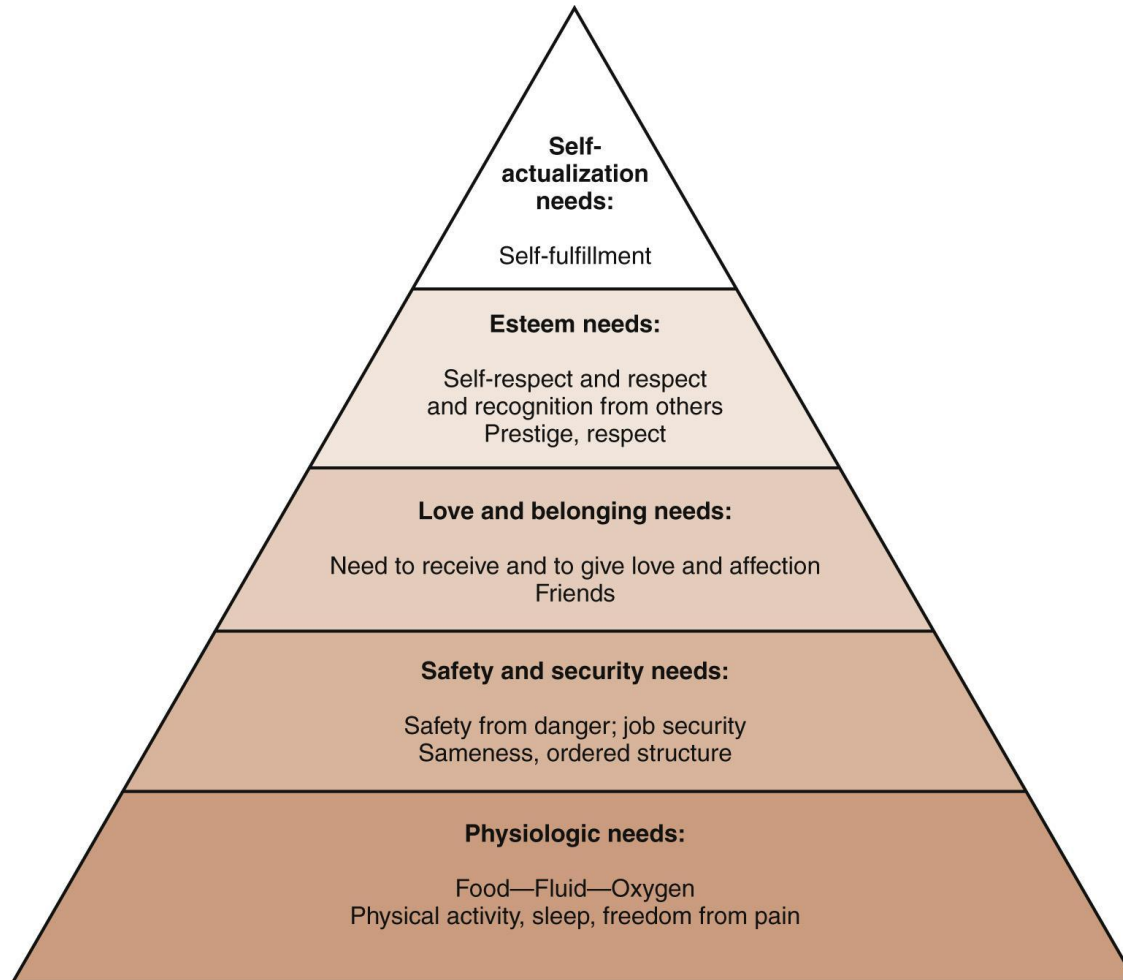
Expanding Role, cont'd

- With implementation of the electronic medical record (EMR), the HUC has expanded responsibilities:
 - ▢ The "go-to" person to assist doctors, nurses, etc. in use of EMR system
 - ▢ Listening to visitor, patient, and nursing unit personnel complaints
 - ▢ Problem solving

Interpersonal Behavior

- Interpersonal refers to personal relationships.
- Behavior refers to how people act.
- An understanding of interpersonal behavior assists in understanding our own behavior and the behavior of others.
- To study interpersonal behavior, we look at the famous psychologist Abraham Maslow's Hierarchy of Needs.

Maslow's Hierarchy of Needs



Physiologic Needs

- Sufficient food, fluids, oxygen, physical activity, sleep and freedom from pain
 - Unmet physiologic need
 - Patient is NPO for 10 hours prior to a procedure.
 - Response
 - A food tray is ordered for the patient as soon as the procedure has been completed and the patient returns to their room.

Safety and Security Needs

- To be sheltered, clothed, feel safe from danger, secure about job and financial future
- To have freedom from fear, anxiety, and chaos
 - Unmet Safety/Security Need
 - A patient just learned that his insurance is not going to pay for his entire hospitalization.
 - Response
 - A representative arranges a payment schedule.

Belonging and Love Needs

- To feel loved; to be a part of a group
 - Unmet Belonging and Love Need
 - An elderly patient has been in the hospital for 3 days, and no one has visited him.
 - Response
 - If the patient can be in a wheelchair, he could be brought out in the lounge or hall way, or a volunteer could spend a little time with him.

Esteem Needs

- To have self-respect, feelings of adequacy, self-confidence, and prestige
- To be recognized and treated with dignity
 - Unmet Esteem Need
 - A patient shares with you that she feels her doctor talks down to her and isn't telling her what she needs to know about her condition.
 - Response
 - Relay the patient's concerns to her nurse.

Self-Actualization Needs

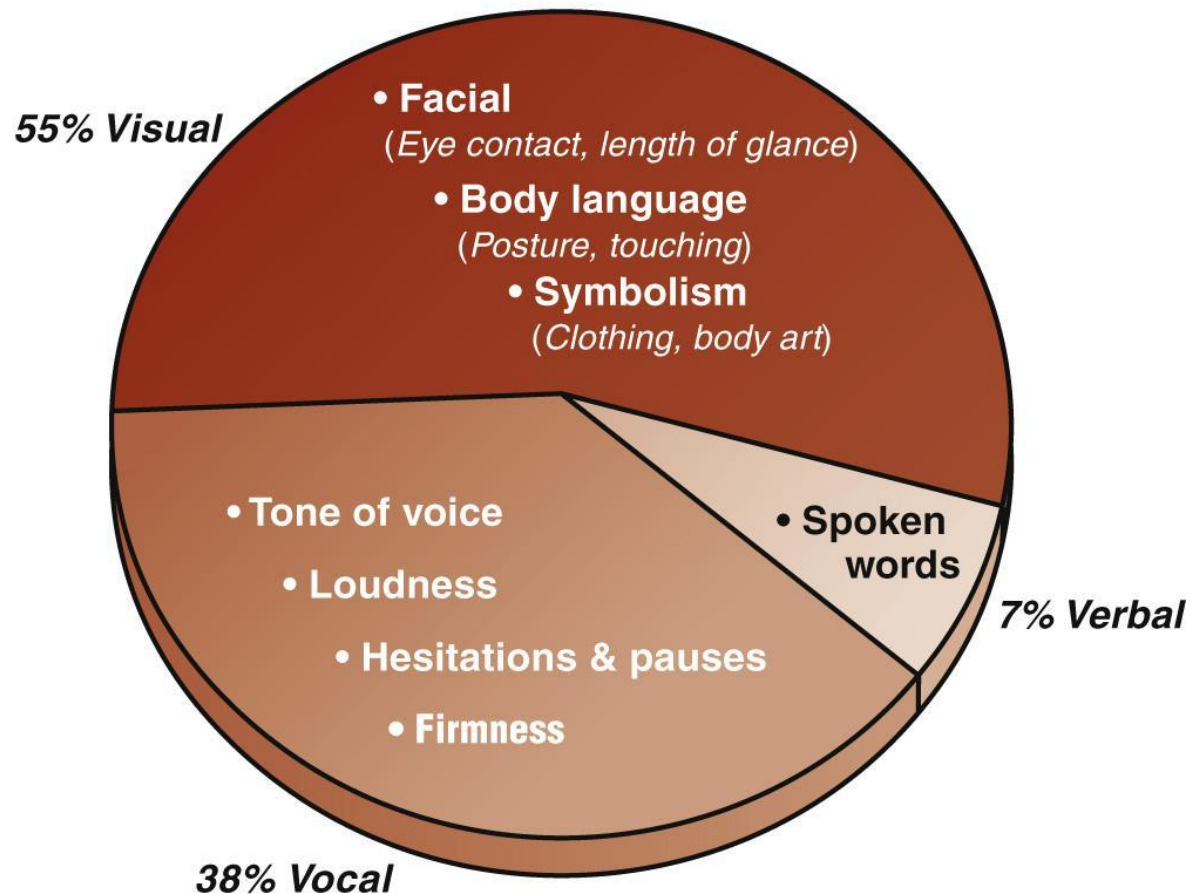
- 1People must:
 - ▢ Be developed to their full potential.
 - ▢ Have feeling of contentment.
 - ▢ Be self-fulfilled.
 - ▢ Be creative.
 - ▢ Accept other people.
- Self-actualization is the development of a personality to its full potential.

Four Components of Communication

- Sender – the person transmitting the message
- Message – the images, feelings, and ideas transmitted
- Receiver – the person receiving the message
- Feedback – the response to the message

Verbal, Vocal, and Visual Communication

Communication is:



Causes of Miscommunication

- Encoding
 - A poor choice of words or an inconsistency between verbal and nonverbal messages may result in unsuccessful communication.
- Decoding
 - Inconsistency in the verbal and nonverbal symbols received from the sender
 - Lifestyle, age, cultural background, environment, and poor listening

Methods of Communication

- Verbal
 - The use of language or the actual words spoken
- Nonverbal
 - The use of eye contact, body language, facial expression, or symbolic expressions, such as clothing that communicate a message

Types of Nonverbal Communication

- Symbolic:
 - Clothing
 - Hair
 - Jewelry
 - Body art
 - Cosmetics
 - Automobile
 - House
 - Perfume or cologne

Types of Nonverbal Communication, cont'd

- Body Language:
 - Posture
 - Ambulation
 - Touching
 - Personal distance
 - Eye contact
 - Breathing
 - Hand gestures
 - Facial expressions

Lesson 5.2

Developing Listening, Feedback, and Intercultural Communication Skills

8. List five levels of listening and nine ways to improve listening skills.
9. List five ways to improve feedback skills.
10. Define and explain the importance of culturally sensitive care in the health care setting.
11. List five guidelines to follow that could improve intercultural communication.

Listening Skills

- Hearing is a physical ability; listening is a skill.
- For successful communication, the sender and receiver must both participate actively.
- Active participation for the receiver requires effective listening skills.
- Most people have had little training on how to listen effectively.

Five Levels of Listening

- Ignoring
- Pretend Listening
- Selective Listening
- Attentive Listening (Active Listening)
- Empathic Listening

Improving Listening Skills

- Stop talking.
- Teach yourself to concentrate.
- Take time to listen.
- Listen with your eyes.
- Listen to what is being said, not only how it is being said.

Improving Listening Skills, cont'd

- Suspend judgment.
- Do not interrupt the speaker.
- Remove distractions.
- Listen for both feelings and content.

Feedback

- The verbal and nonverbal response to the message sent
- The final component in the communication process
- Tells the sender how much the message was understood

Improving Feedback Skills

- Paraphrase (Repeat the message to the sender in your own words.)
- Repeat the last word or words of the message.
- Use specific rather than general feedback.
- Use constructive feedback rather than destructive feedback.
- Do not deny senders' feelings.

Culturally Sensitive Care

- Involves taking the time to learn about the cultural backgrounds of patients.
- May require incorporating their beliefs and practices into their care plan.
- Valuing diversity means:
 - Creating an environment that respects and includes differences
 - Recognizing the unique contributions that individuals with many types of differences can make
 - Creating an environment that maximizes the potential of all individuals.

Culturally Sensitive Care, cont'd

- Many conflicts occur in the health care delivery system because of cultural misunderstandings:
 - Verbal and nonverbal language
 - Lack of courtesy
 - Objectivity

Improving Intercultural Communication

- Understand and evaluate your own values, beliefs, and customs before working with and caring for people of varying cultures.
- Take the time to learn about the cultural backgrounds of patients.
 - May involve incorporating their beliefs and practices into their care
- Do not judge others by the standards of your own values and beliefs.

Improving Intercultural Communication, cont'd

- Avoid stereotyping or making assumptions about a patient or a co-worker on the basis of race or ethnicity.
- Treat everyone with respect as unique individuals, regardless of gender, age, economic status, religion, sexual status, education, occupation, physical makeup or limitations, or command of the English language.

Speaking to Someone Who Does Not Speak English Well

- Do not speak loudly.
- Talk distinctly and slowly.
- Emphasize key words.
- Let the listener read your lips.
- Use printed words (after determining the reading ability of the listener) and pictures.

Speaking to Someone Who Does Not Speak English Well, cont'd

- Do not use slang or jargon.
- Organize your thoughts.
- Choose your words carefully.
- Construct your sentences to say exactly what you want to say.
- Observe body language carefully.
- Try to pronounce names correctly.

Speaking to Someone Who Does Not Speak English Well, cont'd

- Ask for feedback to assess understanding.
- Ask how the person wishes to be addressed.
- Call for an interpreter if necessary and if available.
- Speak directly to the person, even if an interpreter is present.

Lesson 5.3

Using Assertiveness Skills

12. Identify assertive, nonassertive, and aggressive behaviors; evaluate your assertiveness; and respond to situations using assertiveness skills.
13. List six steps to follow when dealing on the telephone with a person who is angry.
14. Identify five ways that communication and interpersonal skills are used in the health care setting.
15. List 12 preceptor guidelines for training a HUC student or a new employee.
16. List 10 student guidelines for completing the clinical experience.

Assertiveness for the HUC

- Techniques to cope effectively with problems and conflicts:
 - Using assertiveness
 - The art of expressing yourself clearly and concisely
 - Being able to clarify when necessary
 - Being able to explain and communicate in an open, honest manner

Aggressive Behavior

- Typically self-enhancing at the expense of others
- The person may express feelings but hurts others in the process.
- Signs of aggressive behavior:
 - Verbal attacks
 - Disparaging remarks
 - Manipulations

Nonassertive Behavior

- Typically self-denying and does not express true feelings
- This person does not stand up for his rights and allows others to choose for him.
- Because of inadequate response to the situation, the individual feels hurt and anxious.

Assertive Behavior

- Self-enhancing but not at the expense of others
- Involves open, honest communication
- Ability to express needs, expectations, and feelings.
- Being assertive also means being able to accept compliments with ease and to admit errors.
- It means taking responsibility for your actions

Assertive or Aggressive?

- Can you identify which style is used in these scenarios?
 - #1: You always leave too much work for the next shift.
 - #2: Would you have time to prepare the daily forms before you leave each day? I find it difficult to do that when it's so hectic in the mornings.

Assertive or Nonassertive?

- Can you identify which style is used in these scenarios?
 - #1: I had entered a request for the 25th off a month ago. The new schedule is out, and I am scheduled to work on the 25th. Would you please change that so I can have the 25th off?
 - #2: I'm scheduled to work on the 25th. I'm just a unit clerk; nobody ever pays attention to what I want.

Assertiveness Skills

- The goal of using assertiveness in communication is to arrive at an “I win, you win” conclusion = a workable compromise.
- Four assertiveness skills that may be used to reach a workable compromise:
 - Broken record
 - Fogging
 - Negative assertion
 - Negative inquiry.

Broken Record Technique

- Allows you to say no over and over again without raising your voice or getting irritated or angry.
- You must be persistent and not give reasons, excuses, or explanations for not doing what the other person wants you to do.
 - By doing this, you can ignore manipulative traps and argumentative baiting.

Fogging

- Allows you to accept manipulative criticism and anxiety-producing statements by:
 - Offering no resistance
 - Using a noncommittal reply
 - Calmly acknowledging that there may be some truth in what the critic is saying
 - Yet retaining the right to remain your own judge.

Negative Assertion

- Allows you to accept your errors and faults without becoming defensive or resorting to anger
- A technique of admitting errors without affecting your worth as a human being
- It includes not using self-depreciation, such as “that was so stupid of me.”

Negative Inquiry

- Allows you to actively prompt criticism to use the information or, if manipulative, to exhaust it
 - By doing this, you obtain clarification about the criticism and hopefully bring out possible hidden issues that may really be the point.

Dealing with an Angry Telephone Caller

- Always identify yourself by nursing unit, name, and status.
 - Puts you on more personal level with caller
 - Callers may become even more upset if they need to ask questions to determine whom they are talking to.
- Avoid putting the person on hold.
 - Placing an angry person on hold may escalate their anger.
- Listen to what the caller is saying.
 - Do not become defensive.
 - Remember – the caller is not angry with *you*.

Dealing with an Angry Telephone Caller, cont'd

- Write down what the caller is saying.
- Acknowledge the anger.
 - “I understand that you are angry.”
 - “I hear your frustration.”
- Do not allow the caller to become abusive.
 - “I feel you are becoming abusive.”
 - “Please call me back in a few minutes so we can talk about this calmly.”

Answering the Phone



Communication and Interpersonal Skills

- Five areas the HUC will need communication and interpersonal skills:
 - Obtaining information
 - Providing information
 - Developing trust
 - Showing understanding
 - Relieving stress

Guidelines for the Health Unit Coordinating Preceptor

- Provide a copy of dates and times the student or new employee is to be on the nursing unit to complete their clinical experience.
- Obtain a list of objectives (provided by the hospital or by the school).
- Take the student/new employee on a tour of the nursing unit and hospital.
- Set a positive example.

Guidelines for the Health Unit Coordinating Preceptor, cont'd

- Notify the instructor or nurse manager if the student/new employee does not call prior to being late or absent.
- Notify the student and your nursing unit or the new employee and the nurse manager if you are going to be tardy, absent, or transferred to another unit.
- Stay with the student/new employee to monitor progress and check off objectives as completed with competence.

Guidelines for the Health Unit Coordinating Preceptor, cont'd

- Provide feedback to the student/new employee, and offer suggestions for improvement.
- Notify the student's instructor or the new employee's nurse manager if the student/new employee:
 - Is not dressed according to hospital/school dress code.
 - Is not performing in an appropriate and professional manner.
 - Is having difficulty completing objectives or if you have any serious concerns.
- Complete an evaluation form regarding the student's clinical experience.

Guidelines for the Health Unit Coordinating Student or New Employee

- Be sure you know:
 - When and where you are to complete your clinical experience
 - The name of your preceptor
- If you are a student, provide your preceptor with:
 - A list of objectives
 - The instructor's telephone and/or pager number
- Notification of tardiness or absence

Guidelines for the Health Unit Coordinating Student or New Employee, cont'd

- The student must notify the instructor
 - If he or she leaves the hospital prior to the end of the shift.
- It is the student's responsibility to notify the instructor if:
 - The preceptor is going to be late, absent, or transferred to another unit.
- The student or new employee should:
 - Arrive dressed appropriately and prepared to learn and work each day
 - Be accountable for their learning.

Guidelines for the Health Unit Coordinating Student or New Employee, cont'd

- The student needs to be:
 - Flexible and should refrain from saying
 - “That’s not the way we were taught in class” or
 - “That’s not the way we did it at Previous Community Hospital.”
- The student or new employee should:
 - Communicate openly with the preceptor and instructor or nurse manager regarding any problems with their clinical performance.

Guidelines for the Health Unit Coordinating Student or New Employee, cont'd

- The student/new employee should:
 - Have the list of objectives/evaluation forms completed and signed off by the preceptor two days prior to the last clinical day.
 - Complete an evaluation form regarding their clinical experience or orientation.