

Palliative Care

Communication Skills

Learning Package

LEVEL ONE



This communication skills learning package has been adapted for use with health and social care staff who provide palliative and end of life care. It is by no means exhaustive, but is intended to give the learner an overview of communication skills required at level 1 as outlined in the palliative care communication skills strategy.

You are asked to complete this package and then discuss your learning points with your line manager or supervisor. On completion of this learning package you should be able to demonstrate your knowledge and understanding to meet level 1 learning outcomes.

Level 1 learning outcomes

- a) Understand how to communicate with a limited range of people, on day-to-day matters in a form that is appropriate to the individual and the situation
- b) Recognise the need for timely communication
- c) Understand the process that leads to effective listening and information giving, including the importance of non-verbal communication
- d) Understand how to reduce barriers to effective communication, including environmental (noise/ privacy) personal (health of patient) and social (language, ability to understand)
- e) Recognise how culture and ethnicity can impact on communication styles, expectations and preference
- f) Understands the importance of presenting a positive image of her/him self and the service
- g) Understands how to accurately report and/or records work activities according to organisational procedures
- h) Understands the importance of communicating information only to those people who have the right and need to know it consistent with legislation, policies and procedures, for example confidentiality, data protection act, complaints resolution, language interpretation, family dynamics.
- i) Reflects on their limitations with regard to communication and involve appropriate colleagues as necessary
- j) Recognise subjects that are inappropriate for general discussion in front of others, i.e. own social life etc
- k) Understands the emotional impact on people when coping with their illness and how that influences communication.
- l) Recognise the importance of giving clear explanations and gaining permission prior to carrying out any activity, and to understand the reporting procedures if permission is not obtained.

Palliative Care Communication Skills Training

Introduction

What is Palliative Care?

Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.

Palliative care for adults:

- provides relief from pain and other distressing symptoms
- affirms life and regards dying as a normal process
- intends neither to hasten or postpone death
- integrates the psychological and spiritual aspects of patient care
- offers a support system to help patients live as actively as possible until death
- offers a support system to help the family cope during the patient's illness and in their own bereavement
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated.
- will enhance quality of life, and may also positively influence the course of an illness
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications

Source: World Health Organisation (WHO) definition of palliative care 2002

What is Communication?

Communication is the exchange of information, whenever two or more individuals are together communication is taking place.

With any communication one of the most important things to remember is, it is not **what** you say but **how** you say it that has the most impact on the person you are dealing with.

People interpret things in very different ways, it is important that you are clear when you communicate.



Exercise 1

Write down 6 words to describe a banana.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Now ask a friend or colleague to do the same and compare results.

The purpose is to show that there is more to good communication than words. Everyone has different interpretations of things which are associated with life's experience, your interpretation may be different to someone else's. This is where communication can break down and misunderstandings arise. Always check back that you understand what is being said and that the person understands what you have said. **'If they haven't heard you, you haven't said it.'**

Studies show that the effectiveness of how you communicate is split into the following figures.

Words are 7% effective

Tone is 38% effective (Tone is how you say things e.g. too loud, too quickly, impatient, patronising or sensitively and with respect)

Body Language is 55% effective

What is Body language?

Body language is a term for communication using body movements or gestures instead of, or in addition to, sounds, verbal language or other communication. It describes all forms of human communication that are not verbal language. This includes the most subtle of movements that many people are not aware of, including winking and slight movement of the eyebrows. In addition body language can also incorporate the use of facial expressions.

Positive body language shows you are interested in what the person is saying.

Tips for positive Body Language

- Relaxed Body Position- (though don't slump) this helps put the other person at ease as you look friendly and helpful. If you appear tense you may seem unreceptive or nervous.
- Open Posture -by standing at a slight angle to the other person so that you don't seem threatening and if the other person is sitting try and match their position by also sitting.
- Lean Slightly Forward-as a sign of involvement, but don't overdo it or you will invade their personal space.
- Eye Contact-should be appropriate (normally there is more eye contact as the other person is talking). Two extremes of inappropriate eye contact would include diverting the eyes or staring. If you look down or away too often it may indicate tension or boredom where as staring may be interpreted as aggression. In some cultures regular eye contact (70%) can either be seen as offensive or even flirtatious, particularly female to male eye contact
'I trained in Switzerland and I was astonished when a Swiss doctor told me that I would be considered to be telling a lie if I did not look straight into a person's eyes' (Pakistani doctor)
- Pointing and waving your finger, standing with your hands on hips, fists clenched and frowning are all examples of where your body language could be interpreted as aggressive.
- Appropriate Facial Expression-be friendly and relaxed. Smiles demonstrate interest, but remember your expression needs to be consistent with what you or the other person is saying.
- Nod Your Head-this indicates that you are paying attention, encourages further discussion and shows that you are following what is being said. Acknowledge the other person's arrival, even if you are busy (for example on the telephone).

What do we mean by listening?

One of the best ways to communicate with people is to stop talking and start listening; but listening is more than not talking. Listening means not only hearing what is being said but also attempting to understand what lies behind the words spoken. The good listener recognises that the other person has something constructive to offer and seeks to discover what it is, even though their thoughts may be expressed badly. Effective listening requires a continuous determined effort to pay attention to the speaker and to his/her words. Listening is not easy.

Symptoms of poor listening

- Deciding that the subject is uninteresting or irrelevant without first giving others the chance to say what is on their mind
- Allowing your prejudices such as colour, accents, personal appearance etc. to determine your decision whether or not to give the person your full attention, i.e. being judgemental

- Selective listening i.e. pre-programmed to turn off at some topics
- Interrupting
- Daydreaming
- Being distracted by other people

Exercise 2



You have gone into a shop and need some advice about something you want to buy. The shop assistants ignore you one carries on reading an article in a magazine, another is having a conversation on a mobile phone.

What barriers are there to communicating?

How do you feel?

What would you do?

Would you go back to the shop again?

Remember patients cannot walk away and are dependent on the people caring for them to communicate effectively.

Confidentiality

Confidentiality is an essential part of communication in the health and social care setting.

Exercise 3

Imagine you are feeling very unwell. You call at the GP Surgery to make an appointment. The receptionist is very abrupt and clearly not listening to your request and refusing to arrange an appointment with the GP. The receptionist starts to ask what is wrong with you in a loud voice which carries across the waiting area.

Think of words to describe how you would feel at this point.

What do we mean by confidentiality?

When is it appropriate to share information?

Discuss with your line manager how this applies to your area of work.



First Impressions

First impressions are vital and can stay with you for a long time sometimes years. They can also influence the relationship you have with someone and can be difficult to alter. A smile of welcome and acknowledgement of someone is as important as how efficiently you complete a task.

Exercise 4

You are visiting a close family member who has been admitted as an emergency to a hospital which you are not familiar with.

You go to the enquiry/reception desk where two staff are sat talking to each other. They notice you standing there and continue their conversation. You say 'excuse me, could you tell me where Mr A is?' Without looking in your direction one receptionist says 'What ward?' You reply 'I think it is ward 2'. The receptionist points and gives you vague directions.

How do you feel?

Suggested Key Words

Upset, embarrassed, unimportant, a nuisance, apprehensive, not welcome, anxious

Exercise 5

You are being admitted to a hospital. The staff on the ward greet you by name. They acknowledge the relatives who have come with you. You are made to feel welcome. Someone shows you to your bed giving you time to settle in and make it clear they are there to answer any queries you may have before they start asking their questions.

Describe how you would feel with this welcome

Suggested Key Words

Special, people taking time, important, a human being, valued, reassured, listened to, respected, acknowledgement of the people important to you

Exercise 6

Imagine yourself needing to come to hospital through the accident and emergency department. You are feeling very unwell but don't know why. You are struggling to walk so need help.

You are seen by a Doctor and are now in a wheelchair. You have been told you need some tests. Someone then appears in front of you. They don't introduce themselves and don't ask your name but take the wheelchair and start wheeling you away.

Think of words to describe how would you feel at this point?

Suggested Key Words

Frightened, unsure, out of control, an object, not human, disrespected

Exercise 7

Whilst carrying out your day to day work you meet an Asian lady who does not speak the same language as you. You realise from this lady's body language and her agitated speech that she is distressed.

What would you do in this situation?

Suggested Actions

Acknowledge her distress

Recognise that there is a communication difficulty

Try to make the lady understand you will tell someone

Find someone to tell straight away

Summary of learning points

The exercises in this learning package have been designed for staff to consider their own thoughts and feelings, in every day situations, in order to highlight the communication skills required when dealing with people with palliative care needs.

- Due to the stage in their illness and often unfamiliar surroundings, this group of people are likely to have a heightened emotional state
- Their behaviour may not be as you would normally expect.
- It is important to demonstrate that you are listening and treating people with dignity and respect.

'If you want to treat me equally you may have to be prepared to treat me differently.'

[The Policy Framework for Substantive Equality. WA]

For communication to be effective you need to understand how to reduce barriers to good communication, which include environmental (noise/ privacy), personal (health of patient) and social (language, ability to understand).

If you are unclear about how any elements of this learning package applies to you and/or your role please discuss with your line manager or supervisor.

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