

About Communication Skills

Stressed Out



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An Insider's Guide to Success

- Effectively communicate with colleagues
- Learn how to talk with managers
- Handle nurse-to-nurse hostility
- Deal with difficult patients
- Confidently interact with physicians

Contents

How to use this book.....	ix
About the author	xi
Acknowledgments.....	xii
Introduction	xiii
Part I: Nurse-to-Patient	
Chapter 1: Communication 101	3
Sender responsibilities.....	3
Receiver responsibilities	4
Open your ears.....	5
Become aware of what you communicate	6
Chapter 2: The art of compassionate nursing	9
Patients: In their shoes	10
The old man’s fight.....	11
Making the connection	12
Chapter 3: Aim for the heart.....	15
To love the world, you must first love yourself.....	16
Presence is a present	17
Keep an open mind.....	19

Chapter 4: Can you hear me now? Common communication errors	23
Nurse huddle . . . Here are some secrets.....	24
Respond to the feeling tone.....	25
Take a look from a different perspective	26
Chapter 5: Difficult patients: Between a rock and a hard place	29
Coping with anger!	30
Rebellious, resistant, and refusing to cooperate.....	32
Dealing with unrealistic expectations	33
Chapter 6: Dealing with death.....	35
Helping to write the final chapter	36
What do I say? What do I do?	37
 Part II: Nurse-to-Nurse	
Chapter 7: Join the club: Assimilation into the nursing culture.....	43
Nurses: In their shoes.....	44
So join the club—or try to	45
Why do nurses act that way?.....	46
Chapter 8: Changing history: We need you!	49
It’s all about (communication) style	53
Chapter 9: Defining your boundaries.....	55
Gossip be gone!	57
Chapter 10: Where the rubber meets the road . . . <i>How do I do this again?</i>	59
Knowing your story	59
Spell confidence with DESC	61
Knowing your conflict style	64

Chapter 11: Communication cheat sheet	67
Tools and techniques for you to use	67
Chapter 12: Trouble spots . . . Ouch!	71
But here is <i>my</i> problem	72
A healthy communication list.....	77
 Part III: Nurse-to-Physician	
Chapter 13: Nurses are from Venus, doctors are from Mars	81
Doctors: In their shoes.....	82
The nursing code of conduct	83
Chapter 14: Going to Mars: Working with physicians, not against them	87
A true story of great communication	87
A closer look at nurse-physician relationships.....	89
Chapter 15: Dealing with negative docs	99
Tips for communicating with negative docs.....	100
A collection of communication case studies.....	101
Chapter 16: Speaking SBAR: The language physicians understand ...	105
What is SBAR?	106
So what do you want me to do? When the doc wants you to be the doc.....	108
 Part IV: Nurse-to-Manager	
Chapter 17: “If I only had the nerve . . .”	113
Managers: In their shoes	114
Tricks of the communication trade.....	115

Chapter 18: Easy solutions for difficult managers.....	117
Working for a difficult boss	118
What if I don't like my shift?	120
What do managers do, anyway?	121
Chapter 19: Great expectations!.....	123
Professional behaviors: What can I expect?.....	123
Professional behaviors: What can I do to help?	124
Chapter 20: Working with the boss	127
Stay in your power!	128
But here's what I'm dealing with	129
Chapter 21: Uh-Oh! When the psycho is your boss	133
Communicating with a difficult manager.....	136
The communication continuum.....	136
Chapter 22: Communication CPR: How to resuscitate a conversation	141
Communicating about hostility on the unit.....	142
Dealing with prejudice.....	143
Combating helplessness	143
Chapter 23: The last straw: Approaching the director.....	147
Your voice is our future.....	149
Bibliography	151

Chapter 1

Communication 101

"The greatest enemy of effective communication is the illusion of it."

—D. Smith, *Controlling Pilot Error*

Communication is the process of exchanging information. Information is conveyed as words, tone of voice, and body language. But studies have shown that words account for only 7% of the information communicated! Vocal tone accounts for 55% and body language accounts for 38%. To be effective communicators, you need to be aware of your words, tone of voice, and body language at all times.

Sender responsibilities

Both the sender and the receiver have specific responsibilities if communication is to be effective. The sender must ensure that he or she is clear, concise, and to the point, and must also pay attention to background noise. Do not hesitate to move out of the nurse's station or congested areas if necessary. It is also your responsibility to notice if the receiver is receptive to the information you are conveying.

The sender should:

- State one idea at a time
- State ideas simply and clearly
- Monitor his or her tone of voice and tempo
- Explain when appropriate
- Repeat if necessary (if he or she sees ANY doubt!)
- Encourage feedback—ask if the receiver is getting the message
- Read between the lines: Does your choice of words, tone, and body language all convey the same meaning?

Receiver responsibilities

The receiver also has a set of communication responsibilities. Most people will not really listen or pay attention to your point of view until they become convinced you have heard—and appreciate—theirs (Nichols). Be aware of your overload point and stop the transmission if necessary. You could ask the sender to slow down, or stop and say that you want to write the information down. If the information is not urgent, put the sender on hold (just like a telephone.) Listen carefully and provide feedback—acknowledge whether you understand the message, or you don't. If you don't "get it," ask the sender to say it a different way or to say it again. Then, repeat what you think you heard.

The receiver should:

- Listen carefully, concentrate
- Evaluate—think and process the information
- Provide feedback
- Interpret the message
- Verify the message he or she heard was correct

Open your ears

*"A wise old owl sat on an oak;
The more he saw the less he spoke;
The less he spoke the more he heard;
Why aren't we like that wise old bird?"*

—Author unknown

We grow up with the mistaken belief that listening is a “no-brainer,” when, in fact, listening is a learned skill you can practice and get better at with time. On average, a physician will interrupt a patient describing his or her symptoms within 18 seconds of meeting that patient. *In that short time*, many doctors decide on the likely diagnosis and best treatment (Grooman). We talk at 125–250 words per minute, but can listen at 450–900 words per minute! Studies show that immediately after listening to someone, we recall only 50% of what was said. Here are some techniques to practice that will improve your listening skills:

- Focus on what's being said *and not* your response.
- Body language: Assess your body positioning for a listening stance. There's a big difference between a nod and crossing your arms!
- Reflective feedback: Ask questions, or make brief statements that show you understand the message. Don't hesitate to ask for a repeat if necessary. If the subject matter is complex, repeat back to the sender what you think you heard.
- Eye contact is critical. It tells the sender you are following the message.
- Silence can be very effective as well, and tells the sender you are processing the information or that you want more information. People will often volunteer more details when given the opportunity.
- Pull out action items, especially immediate or critical tasks. Repeat them out loud at the end of the conversation. For example: *"You want me to go to pharmacy and pick up the Fentanyl PCA and bring it to the nurse who is taking care of the patient in room 966? Correct?"*

Become aware of what you communicate

*"By three methods we may learn wisdom:
First, by reflection, which is noblest;
Second, by imitation, which is easiest;
And third, by experience, which is the most bitter."*

—Confucius

Here's the interesting part: If words comprise only 7% of communication, then tone of voice and body language make up the other 93%! The non-verbal messages that the pitch of your voice and your body posturing send out are as loud as a foghorn. So what's the problem? The sender is focused on the words and is completely unaware that his or her body is relaying the "real message." (You think you are on a private line, when in fact, the speakerphone has been on all the time.) **Nonverbal communication broadcasts our true feelings to the world.** Your body is shouting what your conscious mind thinks it's hiding!

Confusion rules the conversation as people respond to the nonverbal message you didn't know you were sending.

The essence of communication, therefore, becomes self-awareness. There is a direct relationship between the degree to which we can effectively communicate with others, and the degree to which we know ourselves. The more we become aware of our own feelings, thoughts, and motivations, the more easily we will be able to perceive the thoughts, feelings, and motivations of others. The more real-life experiences we are exposed to, the more opportunities we have to learn and grow. It's not always about what you say. It's about who you are. There is just no faking 93% of the message.

Experience doesn't always have to be firsthand and bitter. You can learn from the experiences of others. The narratives and examples in this book were selected after surveying student and new nurses and asking them, "What are the hardest conversations for you to have with your patients, peers, physicians, and your manager?" Curious?

Critical situations that demand a conversation

A study from VitalSmarts describes the conversations that healthcare professionals struggle with that contribute to patient harm and unacceptable error rates:

Broken rules—shortcuts, not following procedures, neglecting double-checks

Mistakes—poor clinical judgment, inadequate assessment, failure to triage correctly

Lack of support—complaining, refusing to help or share information, criticism

Incompetence—lack of knowledge and skills, poor standard of care

Poor teamwork—cliques, unhealthy competition, upstaging, not valuing team members, blame

Disrespect—condescending language, rudeness, dismissive remarks, slamming education or experience of others

Micromanagement—bullying, threat or force due to misuse of authority

Adapted from "Silence Kills: The Seven Crucial Conversations® for Healthcare"

Your voice is our future

"What we need is what the ancient Israelites called hochma—the science of the heart . . . the capacity to see, to feel, and then to act as if the future depended on you. Believe me, it does."

—Bill Moyers

"Our natural state is to be together" (Wheatley). There is no award for fierce, "Type A" personality independence, no award for not needing each other. In fact, there is nothing more damaging. And at no time in the history of our profession do nurses need each other more than *right now*.

You are the hope for a profession that currently feels the brunt of a dysfunctional healthcare system but is not consciously aware of the impact. With compassion and selflessness, nurses have spent years focusing their time and energy on their patients. Now, in a global shortage, we must turn to one another.

Take care of each other. Reach out and get to know each other. The pace of our lives both at home and at work has made spending time together much more difficult. Share your hopes and fears, your pride and your accomplishments, and celebrate the art and science of a magnificent profession. It is your relationships that will sustain you and bring you joy, that will bind you into a community of caregivers who care about each other. *This is the most optimal environment in which for you to thrive, and for patients to heal.*

The skills and talents you bring to nursing will carry on one of the noblest professions in the world. If not you, then who?

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