Overview of Communication Competencies

Effective communication between clinicians, patients, and families can lead to better health care outcomes and improved quality and safety. The following list identifies behaviors to help clinicians build partnerships with patients and families, leading to better health care quality and safety.

# Before you enter the room

* **Read patient information in their chart before entering the room.**

# When you enter the room

* **Make eye contact with the patient, not a machine or other medical professional in the room.**
* **Smile, if appropriate.** Your smile should be genuine and not forced.
* **Introduce yourself by name and your role in the patient’s care.**“Hi, Mrs. Smith. I’m your nurse, Mary. Is there anything I can do for you now?”
* **Introduce any new people in the room, their role, and what they will do.**“I’d like you to meet Dr. Nancy Burns. She’s a specialist that is going to help manage your sugar. If it’s okay with you, she is going to talk with you.”
* **Have conversations at the patient’s eye level.**

There are two logos at the bottom of the page: the logo of the U.S. Department of Health and Human Services and the logo of the Agency for Healthcare Research and Quality (AHRQ):
Advancing Excellence in Health Care. www.ahrq.gov

# When you assess the patient

* **Ask how the patient prefers to be addressed**   
  (for example, by first or last name).
* **Identify family members who should be partners in care and put their names on the white board in the patient’s room.** Let the patient define who family is. Family can give you information that you don’t know about the patient. They also need to know about the patient’s health so they can take care of the patient at home.

“You may want family or friends to take part in conversations about your health or health care.  
Who would you like to be involved?”

“Who is going to help you once you get home? How would you like these people to be involved in conversations about your care while you’re in the hospital?”

* **Make sure the patient has the Communicating to Improve Quality Tools 1–3 and highlight the main points.**

“We are here to help you. I know the technical stuff,  
but I am not an expert on you. When it comes to  
you, you’re the expert.

Please tell us what you want and need, ask questions, and share any concerns you have about your health.”

* **Invite the patient and family to use the white board as a communication tool.**

“The white board can help us talk with each other. Please feel free to write notes, questions, or concerns on the white board. Here is the pen.”

# Throughout the hospital stay

|  | **Invitation behaviors:** Invite patients and families to engage | **Supportive behaviors:** Support patients and families as they engage |
| --- | --- | --- |
| Include the patient and family as members of the health care team | * **Welcome the patient and family as partners of the health care team. Acknowledge their expertise.**   “We may know more about medicine, but you know more about you and your body. We want you to share what you are feeling and experiencing with us, so that we can provide the best care possible.” | * **React positively when people ask questions, volunteer information, share concerns, or want to take part in treatment decisions.**   **Don’t say:** “Don’t worry. We have done this hundreds of times.”  **Say:** “This procedure takes a picture of how your knee looks after surgery. It helps us follow your progress. It does have a small amount of radiation but should not hurt you.” |
| Ask about and listen to the patient’s and family’s needs and concerns | * **Use open-ended questions to encourage the patient and family to share health information.**   “What is going well right now? What problems are you having?”  “What has been less than perfect in  your care?”  “What questions do you have?”   * **Try to see the experience through the patient’s and family’s eyes.** The hospital is an unfamiliar environment for many patients and families. This can lead to questions, concerns, or anxieties. | * **Listen to, respect, and act on the observations and values of the patient and family.**   “Thanks for letting us know about that drug allergy, Mrs. Jackson. Let me note it in your record. We’ll find another medication.”   * **Help patients and family members articulate their concerns when needed.**   “I see something is bothering you. Please feel free to share it with me. I may be able to help.” |
| Help the patient and family understand the diagnosis, condition, and next steps | * **Give timely and complete information about the patient’s condition.** Review information with the patient and family at every opportunity: during rounds, shift report, medication administration, and discharge planning meetings. * **Check that you explained things well by using “teach back.”**   **Don’t say:** “Do you understand?” **Say:** “I want to make sure I explained that clearly. Do you mind repeating what I just said in your own words?”   * **Share as much information as they want.** Find out how much they want to know.   “Is there anything else you would like to know? Do you want the overall picture or do you want to get the details?” | * **Speak slowly.** * **Use plain language.** Use words everyone can understand. Break messages into shorter statements. * **Invite the patient or family to take notes.** * **Let patients and families know you will find someone with an answer when you can’t answer a question.** Let them know when to expect the answer.   “I don’t have that information, but I will talk with the pharmacist about it and get back to you or have him come and talk to you by this afternoon.” |

# Building Partnerships for Safe Care: Observation Form and Checklist

| **Entering the room** | **Initial assessment** |
| --- | --- |
| * Read patient chart before entering room * Made eye contact with patient * Smiled, as appropriate * Introduced self by name and role * Introduced new people in the room, their role, and what they will do * Had conversations at the patient’s eye level | * Asked how patient prefers to be addressed * Identified family or friends who are team members and wrote names on white board * Highlighted main points of *Communicating to Improve Quality  Tools 1–3* * Invited patient and family to use the white board |

| **Throughout encounter** | **Throughout encounter** |
| --- | --- |
| **Invitation behaviors:** Inviting patients and families to engage   * Welcomed patient and family as part of health care team * Used open-ended questions * Gave complete information about the patient’s condition * Used “teach back” * Found out how much the patient and family members wanted to know | **Supportive behaviors:**  Supporting patients and families as they engage   * Reacted positively when people engaged * Listened to and respected observations and values of patient and family * Helped patients and family members articulate their concerns when needed * Used plain language * Invited patient and family members to take notes * Identified others to answer questions, if needed |

Clinician Name:

| **Notes:** |
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