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Description generated with high confidence

# HEALTHCARE CORE CURRICULUM

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# Instructor Resources

# Module Title: Communication in Healthcare Settings Credits: 1 credit/16 hours

## Module Description:

This module emphasizes the importance of effective communication between and among healthcare employees and their clients/individuals. Included are verbal and non-verbal communication, listening skills, interpersonal communication, team communication, documentation and reporting, and the use of electronic communication devices in healthcare facilities. The focus is on the development of effective communication skills to support quality client/individual care.

## Evaluation Method:

This module will be graded on a Pass/Fail basis. Exams/Assignments must be passed at 75% or greater. Retests on exams are determined by college and program policy.

## Competencies:

1. Describe the components of verbal and nonverbal communication and situations in which these skills can be effectively used.
2. Explain how active listening skills can improve client/individual and team communication.
3. Use a variety of communication techniques to achieve effective interpersonal and team communication.
4. Describe communication skills that are important when managing conflict.
5. Explain the components of accurate and appropriate documentation and reporting, including common medical abbreviations.
6. Explain the roles and responsibilities of team members.
7. Describe the appropriate use of information technology in healthcare settings.
8. Using a problem-solving process applied to healthcare situations, describe how healthcare workers can effectively communicate with their clients/individuals and team members.

# COMMUNICATIONS IN HEALTHCARE

# VOCABULARY LIST

**Active Listening:** Listening to a person by providing feedback, sending listening signs, and asking questions. Listening is not passive.

**Barrier:** An obstacle that gets in the way of effective communication.

**Bias:** A tendency or prejudice toward or against something or someone

**Body Language:** The use of body and facial positions and movement to send a message. Nonverbal communication

**Chain of Command:** The organization of employees in which each person reports to a superior who, in turn, reports to another superior at the next higher level.

**Client:** A person who receives services from another person.

**Communication:** A process in which messages are exchanged between a sender and a receiver, which may include written or spoken word, signals or other methods.

**Conflict:** A disagreement between or among groups or individuals.

**Continuity of Care:** The process by which the client and care team work cooperatively to manage healthcare with a shared goal of ongoing quality care.

**Data:** Information collected for reference or analysis.

**Etiquette:** Manners, acceptable conduct

**Eye Contact:** Eye contact occurs when two people or animals look at each other's eyes at the same time. In people, eye contact is a form of nonverbal communication and can influence cultural social behavior.

**Feedback:** The return of information to the sender by the receiver trying to understand the message.

**Gesture:** A message sent by moving your hands or body.

**Interpersonal Skills:** The ability to communicate with and deal effectively with people.

**Language:** Spoken or written speech. A system of words and expressions shared by a people.

**Message:** A communication (usually brief) that is written or spoken or signaled.

**Motivation:** The moving force behind a character’s actions.

**Negative Attitude:** The way someone thinks of the world in a manner that is not positive.

**Non-Verbal Communication:** The body language between two communicators includes tone of voice, body language, gestures, facial expressions, touch, physical appearance.

**Obstacle:** Something that is in your way.

**Prejudice:** Negative feelings about a person because they belong to a specific cultural or racial group.

**Receiver:** The person receiving the message. Also known as the listener.

**Respect:** Showing care, honor, or admiration for someone or something.

**Sender:** Referred to as the speaker, is the person who creates and delivers the message.

**Team:** A group of people who work, play or do something together.

**Tone of Voice:** The pitch and tone of a person’s voice.

**Verbal Communication:** Any message we send using words.

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# Module Competencies and Instructor Notes

| **MODULE**  **COMPETENCY** | **UNIT**  **COMPETENCY** | **RECOMMENDED**  **MODULE CONTENT** | **INSTRUCTOR NOTES**  Suggested discussions and resources |
| --- | --- | --- | --- |
| 1. Describe the components of verbal and non-verbal communication and situations in which these skills can be effectively used. | 1A. Name two types of communication and give examples of each. | 1A. Communication is the exchange of information.  Verbal Communication   1. Spoken word 2. Written word 3. Used to give and receive information, facts, and sharing of experiences 4. Be aware of the ability to understand words and written communication 5. Carefully choose words 6. Check tone of voice 7. Be aware of the speed of speaking   Non-verbal Communication is communication without the use of words   1. Body language 2. Facial expressions 3. Use of touch 4. Posture 5. Gestures 6. Silence 7. Movement | Write down 3 specific examples of verbal and non-verbal communication and be prepared to discuss them online/in class. |
|  | 1B. Describe the components of communication. | 1B. Effective communication occurs when the receiver gets the information in the way the sender intended  Components of communication   1. Sender 2. Message 3. Receiver 4. Feedback   Effective communication techniques   1. Reduce background noise 2. Listen attentively 3. Pace speech to the needs of the receiver 4. Allow time for talking or response 5. Show interest in what is being communicated 6. Maintain eye contact as culturally appropriate 7. Speak clearly and as loudly as is needed 8. Speak in terms that the client understands; adjust accordingly for age and developmental needs. | Refer to vocabulary list for the module  Refer to the handout, [*Therapeutic Communication Techniques*](https://www.healthforceminnesota.org/hccc/files/CHC-Therapeutic-Communication-Techniques-and-Barriers-to-Communication.docx)(Username and password: HCCC) |
|  | 1C. List examples of barriers to effective communication. | 1C. Barriers to effective communication   1. Hearing loss 2. Vision loss. 3. Belittling a person 4. Speaking a different language other than the receiver's primary language 5. Negative attitude 6. Defensiveness 7. Prejudice or judgmental attitude 8. Dominating the conversation 9. Appearing too busy or in a hurry 10. Appearing uninterested 11. Giving false or inappropriate reassurances 12. Too much background noise or inappropriate environment 13. Personal cell phone usage 14. Inappropriate usage of texting | Refer to the handout, [*Barriers to Communication*](https://www.healthforceminnesota.org/hccc/files/CHC-Therapeutic-Communication-Techniques-and-Barriers-to-Communication.docx)(Included with *Therapeutic Communication Techniques* handout – username and password: HCCC)  Write down 2 experiences in which you have experienced barriers to communication, be prepared to discuss them online/in class. |
| 2. Explain how active listening skills can improve client and team communication. | 2A. List basic listening skills. | 2A. Basic listening skills   1. Clear your mind of distractions 2. Face the speaker 3. Maintain good eye contact 4. Do not cross your arms or legs. 5. Lean toward the speaker 6. Sit where the speaker can see and hear the receiver. 7. Do not interrupt the speaker 8. Try to eliminate distraction in the environment 9. Give the speaker your full attention 10. Take time listening to the speaker, do not appear rushed | Discuss Principles for Good Listening  Potential video (3mn): [*Effective Listening Skills*](https://www.youtube.com/watch?v=ENkwUBPhMJw) |
|  | 2B. Describe active listening skills. | 2B. Active Listening   1. Pay attention to the verbal and non-verbal message 2. Focus on the client’s needs not on your own 3. Maintain eye contact as culturally appropriate. 4. Be aware of your own biases. 5. Convey an attitude of caring and respect to the client. 6. Ask questions if you do not understand the message | Practice active listening skills and write down 3 specific examples of skills you used. Be prepared to discuss them online/in class. |
| 3. Use a variety of communication techniques to achieve effective interpersonal and team communication. | 3A. Select effective verbal communication techniques. | 3A. Effective verbal communication techniques   1. Speak slowly and clearly 2. Have the attention of the receiver 3. Focus on the client’s/individual’s feelings 4. Repeat the message in your own words to make sure you understand (restate) 5. If you do not understand the message ask the sender to restate the message and do not pretend that you understand 6. Seek information from the client/individual |  |
|  | 3B. Recognize effective non-verbal communication skills and skills to promote communication with clients/individuals who have difficulty hearing, seeing, speaking or have language barriers. | 3B. Effective non-verbal communication   1. Face the speaker 2. Non-verbal message supports the verbal message. 3. Appropriate posture 4. Appropriate use of gestures 5. Pleasant facial expression 6. Utilize appropriate listening skills   Techniques for communicating with the hard of hearing   1. Face the person speaking to 2. Speak clearly and distinctly 3. Keep hands away from mouth to allow for lip reading 4. Stand or sit near the person speaking to 5. Assist the listener with a hearing aid as appropriate 6. Reduce background noise 7. Do not chew gum or eat when speaking   Techniques for communicating with the vision impaired   1. Identify self and make presence known when approaching an individual with vision difficulties 2. Call the individual by name as appropriate 3. Knock and speak to the client before entering a room 4. Reduce glare in the room which can reduce the ability to see 5. Assist with the use of glasses as needed 6. Maintain or explain the placement of articles in the person’s surroundings 7. Offer arm as a guide when walking; walk slightly ahead of the individual 8. Remember people with vision difficulties may not be hard of hearing or deaf. Use a normal tone and volume in speech   Techniques for communicating with language or speaking difficulties.   1. Recognize that a person who cannot speak usually understands what is being said 2. Recognize that the individual may express anger or frustration when attempting to communicate. |  |
|  | 3C. List basic telephone usage. | 3C. Basic Telephone Usage   1. Answer the phone with the name of the facility, your name, and title. 2. Use a soft, friendly voice. 3. Speak clearly. 4. Never chew gum or eat when speaking on the phone 5. Speak at a moderate rate of speed. 6. Do not use the phone for making or receiving personal calls. |  |
|  | 3D. Demonstrate telephone message taking skills. | Message taking skills  Message should include   1. date 2. time 3. who the message is for 4. the caller’s name 5. caller’s phone number 6. reason for the call | Write down a message based on information given by the instructor |
| 4. Describe communication skills that are important when managing conflict. | 4A. Define conflict. | 4A. Conflict  Whenever two or more people disagree on an issue.   1. The outcomes of conflict may lead to change in a previous way of thinking 2. It may have a positive effect. | Refer to [*Conflict Handout*](https://www.healthforceminnesota.org/hccc/files/CHC-Conflict-Handout.docx)  Username and password: HCCC  Have students verbalize examples of conflict in class. |
|  | 4B. List causes of conflict. | 4B. Causes of conflict.   1. The tension between groups (gender issues) 2. Increased workload 3. The threat to safety or security (layoffs) 4. Cultural differences. 5. Invasion of personal space. | Have students identify the cause of the conflict they gave in the example. |
|  | 4C. List groups in which conflict occurs | 4C. Groups in which conflict occurs   1. Among team members 2. Among groups (e.g., dietary and housekeeping) 3. Among healthcare providers and clients/visitors 4. Among facilities. | Online/in class discussion |
|  | 4D. List communication skills that are important when managing conflict | 4D. Communication skills when managing conflict   1. Describe the problem as specifically as possible. 2. Avoid describing solutions when identifying the problem. 3. Consider the problem to be mutual, not one-sided 4. Identify the differences between each party before solving 5. Consider the problem from the other side’s point of view. 6. Use brainstorming to find solutions. 7. Work together to determine the best solution. 8. Reach an agreement about how the conflict is resolved. 9. Evaluate the solution. | Online/in class discussion |
| 5. Explain the components of accurate and appropriate documentation and reporting including common medical abbreviations. | 5A. Describe the components of accurate and appropriate documentation including common medical abbreviations | 5A. Components of documentation   1. Accurate 2. Legible 3. Date (11/30/2024) 4. 24-hour clock or standard time 5. Full signature 6. Title 7. Correct spelling 8. State facts, not opinions. 9. Proper documentation etiquette   Documentation Do’s   1. Chart / document promptly:  * As soon as possible after making an observation or providing care * May inadvertently omit important information if wait until end of shift * If documentation must be delayed, keep a list of notes  1. Only use approved abbreviations    * Refer to facility’s list of approved abbreviations 2. Be clear and concise: brief, not too wordy 3. State only facts, no opinions 4. Document exact time of entry 5. Use permanent black or blue ink in paper charts, not pencil 6. Draw lines through blank spaces 7. Correct errors properly    * Paper chart: Cross out with single line, write “mistaken entry” or “mistaken documentation” and initials    * Electronic health records (EHRs): strike out option when mistakes are made 8. Sign entry with first initial, last name, and title   Documentation Don’ts   1. NEVER document in advance    * Charting care that was not yet provided is fraud 2. Never erase or scribble out entries    * Altering client records is a criminal offense 3. Don’t leave empty spaces    * Someone could add documentation in the space 4. Don’t chart:    * Opinions    * Staff conversations    * Staff conflicts    * Staff shortages    * Excuses |  |
|  | 5B. Describe the components of accurate and appropriate reporting. | 5B. Components of reporting:   1. Facts not opinions 2. Clear 3. Specific 4. Chain of command 5. Proper reporting etiquette |  |
|  | 5C. Recognize and report abnormal physical changes to supervisor or appropriate person  5D. Recognize and report objective information (signs) to the charge nurse: | 5C & 5D. Abnormal physical changes to report (objective)   1. Shortness of breath 2. Rapid respirations 3. Fever 4. A cough 5. Vomiting 6. Cyanosis 7. Excessive drowsiness 8. Excessive sweating 9. Swelling of extremities 10. Watery or hard stool 11. Blood in stool (black or tarry consistency) 12. Blood in urine 13. Strong urine odor 14. Persistent skin redness, breaks, tears, or bruises 15. Increase in confusion or memory loss 16. Visible signs of emotional expression or pain |  |
|  | 5E. Recognize and report what the resident may tell you (subjective information or symptoms): | 5E. Subjective symptoms/information   1. Chest pain 2. Abdominal pain 3. Pain anywhere or upon movement 4. Nausea 5. Difficulty or painful urination 6. Change in appetite 7. Trouble swallowing or chewing 8. Feelings of sadness (change of mood). 9. Level of Pain (0-10) or mild, moderate, or severe |  |
|  | 5F. Identify common roots, prefixes, and suffixes to communicate information. | 5F. Medical Terminology   1. Roots 2. Prefixes 3. Suffixes 4. Abbreviations | Student research various types of healthcare disciplines and appropriate medical terminology |
|  | 5G. Identify medical abbreviations to communicate information. | 5G. Usage of Medical Terminology   1. Use only approved terms for appropriate healthcare area 2. Each area has specific terms 3. Medical terms may not be understood by care recipients 4. Review Joint Commission <https://www.jointcommission.org/resources/news-and-multimedia/fact-sheets/facts-about-do-not-use-list/> 5. Review common medical abbreviations 6. Common Abbreviations    * ROM: range of motion    * PRN: as needed    * STAT: immediately    * NPO: nothing per mouth (nothing to eat or drink)    * O2: oxygen    * NKA: no known allergies    * CPR: cardiopulmonary resuscitation    * DNR: do not resuscitate | [CHC Competency 5](https://www.healthforceminnesota.org/hccc/files/CHC-Competency-5-Medical-Terms-and-Quiz4.docx): Medical Terms and Quiz (Username and password: HCCC)  [Medical Terminology Study Guide](https://www.healthforceminnesota.org/hccc/files/Introduction-to-Medical-Terminology-and-Abbreviations-Study-Guide.docx) |
| 6. Explain the roles and responsibilities of team members. | 6A. Recognize characteristics of effective teams.  6B. Discuss methods for building positive team relationships.  6C. Describe attributes and attitudes of an effective leader  6D. Describe the roles workers have in healthcare teams across a variety of healthcare settings.  6E. Examine the impact healthcare teamwork and partnerships have in meeting client healthcare needs. | 6A. Characteristics of effective teams   1. Respectful 2. Purpose-driven 3. Patient/resident-centered 4. Open-minded 5. Displays patience 6. Inclusive   6B. Building team relationships   1. Provide positive feedback 2. Listen to all suggestions 3. Recognize contributions of team members 4. Discuss rather than dictate 5. Bring client/family in where and when needed   6C. Effective leader attributes   1. Patience displayed 2. Encouraging 3. Respectful 4. Kind 5. Assertive not aggressive  * Autocratic, Democratic, Laissez faire  1. Knowledgeable 2. Organized 3. Respects confidentiality 4. Understanding   6D. Roles of team members   1. Basic role is dependent upon the focus of the team 2. All teams share a similar goal: to better the care/situation of a client (quality care and positive client outcomes). 3. The job description of the team member will also determine the role played by each member when an action is determined etc. Ex: a NA/R will reinforce teaching rather than initiate teaching to the client   6E. Impact of the team on meeting the needs of the client   1. Care will be consistent 2. The attitude of caregiver is positive 3. The client feels included in cares 4. The family feels included in cares 5. The confidence of client, family and caregiver increases 6. Caregiver feels valued Quality of care improves |  |
| 7. Describe the use of information technology in healthcare settings. | 7A. Identify a variety of electronic communication devices used in healthcare facilities.  7B. Identify different types and content of health records (patient, pharmacy, and laboratory)  7C. Describe the importance of policies and procedures related to electronic communication required by national, state, local and organizational levels.  7D. Explain procedures for accurate documentation and use of electronic and printed health records.  7E. Discuss the validity of web-based resources. | 7A. Electronic communication devices   1. Fax 2. Computer 3. Distance diagnosing/assessment 4. Telephone 5. Computer 6. Telephone 7. Pager 8. iPod 9. iPad   7B. The content of health records   1. Diagnosis (Dx) 2. Insurance information 3. Medications 4. Personal home address 5. Telephone numbers 6. Diagnostic test results 7. History (Hx) of health issues 8. Symptoms (sx) of illnesses presented 9. Financial information 10. Religion 11. Emergency Contact and Healthcare Directives 12. Biological client data transmitted from wearable and implantable medical devices (IMD) to electronic health record. Over 400 devices. Some examples include:   ***Implanted devices*:**   * Pacemakers & Implantable Cardioverter-Defibrillators (ICDs) * CardioMEMS sensor implanted in pulmonary artery (PA) that transmits PA pressures. * Insulin pumps: monitor blood glucose levels and deliver insulin * Neurostimulators that stimulate specific nerves that collect biological data * Smart Pills/ingestible sensors that monitor and transmit data from the gastrointestinal tract.   ***Wearable devices*:**   * Continuous blood glucose monitoring to manage diabetes * Fitness trackers * Sleep apnea: CPAP machines can transmit compliance and track sleep apnea episodes   7C. Electronic communication Policy/Procedures   1. Must indicate personnel responsible for usage of data 2. Importance of confidentiality 3. Maintenance of devices 4. Proper usage of devices 5. Policies to comply with HIPAA 6. Data privacy considerations for wearable and implantable medical devices that transmit data to electronic health records (EHRs).  * Client data privacy concerns * Policy considerations   + Ensure a secure network with continuous monitoring that devices are connected to.   + Obtaining informed consent from clients before collecting data.   + Disclosure to clients regarding use of personal information and third parties with access to information, e.g., insurance companies.   + Ownership of data and patient access to data.   7D. Accurate documentation   * Records are legal documents * Data permissible in court * Documents must be destroyed properly (shredded)   7E. Use of websites   * Care to use only substantiated sites * Do not place personal information on non-secure websites | **Wearable device study:**  <https://pmc.ncbi.nlm.nih.gov/articles/PMC6746089/>  **Implantable device study:**  <https://pmc.ncbi.nlm.nih.gov/articles/PMC7772635/>  **Other studies and articles to inform data privacy concerns and policy considerations for wearable and implantable medical devices:**  [*Ethical and Legal Implications of Remote Monitoring of Medical Devices*](https://doi.org/10.1111/1468-0009.12481)  [*Ethical and legal implications of health monitoring wearable devices: A scoping review*](https://www.sciencedirect.com/science/article/pii/S0277953625000140)  [*Ethical considerations for the use of consumer wearables in health research*](https://pmc.ncbi.nlm.nih.gov/articles/PMC9900157/)  [*Ethical Implications of Wearable Digital Health Technology: Balancing Innovation and Patient Autonomy*](https://ajhcs.org/article/ethical-implications-of-wearable-digital-health-technology-balancing-innovation-and-patient-autonomy)  [*Wearable Tech Data: Ethical Obligations & Use in Healthcare*](https://aihcp.net/2024/07/30/wearable-tech-data-ethical-obligations-use-in-healthcare/)  [*Security Risks and User Perception towards Adopting Wearable Internet of Medical Things*](https://doi.org/10.3390/ijerph20085519) |
| 8. Using a problem-solving process applied to healthcare situations, describe how healthcare workers can effectively communicate with their clients and team members. | 8A. Describe the steps in problem identification and solution utilizing a team approach. | 8A. Problem-solving steps   1. Identify the problem 2. Analyze the problem 3. Generate and analyze solutions-brainstorm for possible solutions, evaluate the best solution. 4. Implement the best solution 5. Evaluate the solution’s effect, plan the next steps. | [CHC Competency 1 & 8](https://www.healthforceminnesota.org/hccc/files/CHC-Competency-1-8-Scenarios-Effective-Communication1.docx): Scenarios Effective Communication (Username & password: HCCC) |
|  | 8B. Describe workplace situations in which problem-solving processes are utilized. | 8B. Workplace situations   1. Within the team 2. Within the facility 3. With a client 4. With a visitor   Electronic (computer, Fax)   1. Phone | Online/in class discussion of workplace scenarios in which communication skills are utilized |