

Careful communication



Careful communication

Communication is central to all aspects of preventing and responding to challenging behaviour.

Successful communication builds positive, respectful and collaborative relationships and takes into consideration people's culture, language and health literacy.

Considered communication within our health care service

It is very important we have a skilled, confident and engaged workforce that is:

- > welcoming
- > polite
- > respectful
- > uses empathic listening in all interactions with patients, family, carers and consumers
- > addresses concerns
- > and meets immediate needs.

Effective communication and placing the patient or consumer at the centre of shared decision-making about their care can reduce the likelihood or escalation of challenging behaviour.

Person-centred care

Person-centred care is health care that is respectful of, and responsive to the preferences, needs and values of patients, their carers and the community. The relationship between a health care worker and the patient is the foundation in building trust and ensuring a therapeutic partnership where **the patient is a partner in their own care.**

It is organised and integrated health care that takes into account the patient or consumer's rights, perspective and needs. Person-centred care includes providing appropriate health information to patients, their families and carers, and empowering them to share decision-making about their health care¹.



¹ Staff Information on respecting patients' privacy and dignity with patient-centred care principles

What does communication using person-centred care look and sound like?

- > Using non-verbal behaviour (including body language and facial expressions) to show respect for a person's individuality. For example, do not act as if a person with dementia cannot hear or is not present.
- > Using verbal and non-verbal communication to begin tasks for people to complete independently. For example, patiently explain what they will be doing before doing it and why, then again while doing it. Ensure people understand what it is they are meant to do and why.
- > Making sure verbal statements support feelings of belonging and self-worth. Do not use statements that dehumanise, threaten or show disrespect.
- > Using a person's preferred name and pronoun, and referring to the unique details of their lives.
- > Using verbal and non-verbal strategies to make sure people understand their immediate needs or requests will be met.
- > Involving carers and family in the patient's care and communicating with them as valued participants.
- > Showing patience.



Communication and therapeutic relationships

Patients and consumers of health care services, their families and their carers have expectations of a level of customer service and kindness. Patient, family and carer perceptions that care is unsafe or not meeting the individual's needs can also be triggers for escalation of challenging behaviour.

Clinicians should look for and refer to a patient's [Advanced Care Directive](#) to ensure that health care teams are guided by patient and consumer wishes and goals particularly when patients are unable to guide staff themselves.

Compassion, voice, body language and consideration of personal space are all important in conveying respect. This includes the health care workers' own body language and how they physically touch and handle the patient's body and possessions and how they enter the patient's bed area.

Communicating factors such as waiting times and other information to patients, carers and family members, may help to minimise levels of anxiety, agitation or stress/distress.

Carers as partners in care

Carers may be caring for someone who has a disability, mental illness, chronic condition, terminal illness, dementia, or has an alcohol or drug-related problem. Some carers are guardians or nominated Substitute Decision Makers (SDM) if the person lacks decision-making capacity.

Communicating and engaging with carers is important. Carers can provide essential insights into the causes and triggers of challenging behaviour, calming strategies, early signs of deterioration in mental state, agitation and distress.

Carers have the same health care rights as the patient or consumer they are caring for.

Carers can also exhibit challenging behaviours as they advocate for their loved ones, especially at highly emotional times e.g. birth, acute illness, injury, bad news or when there are delays.

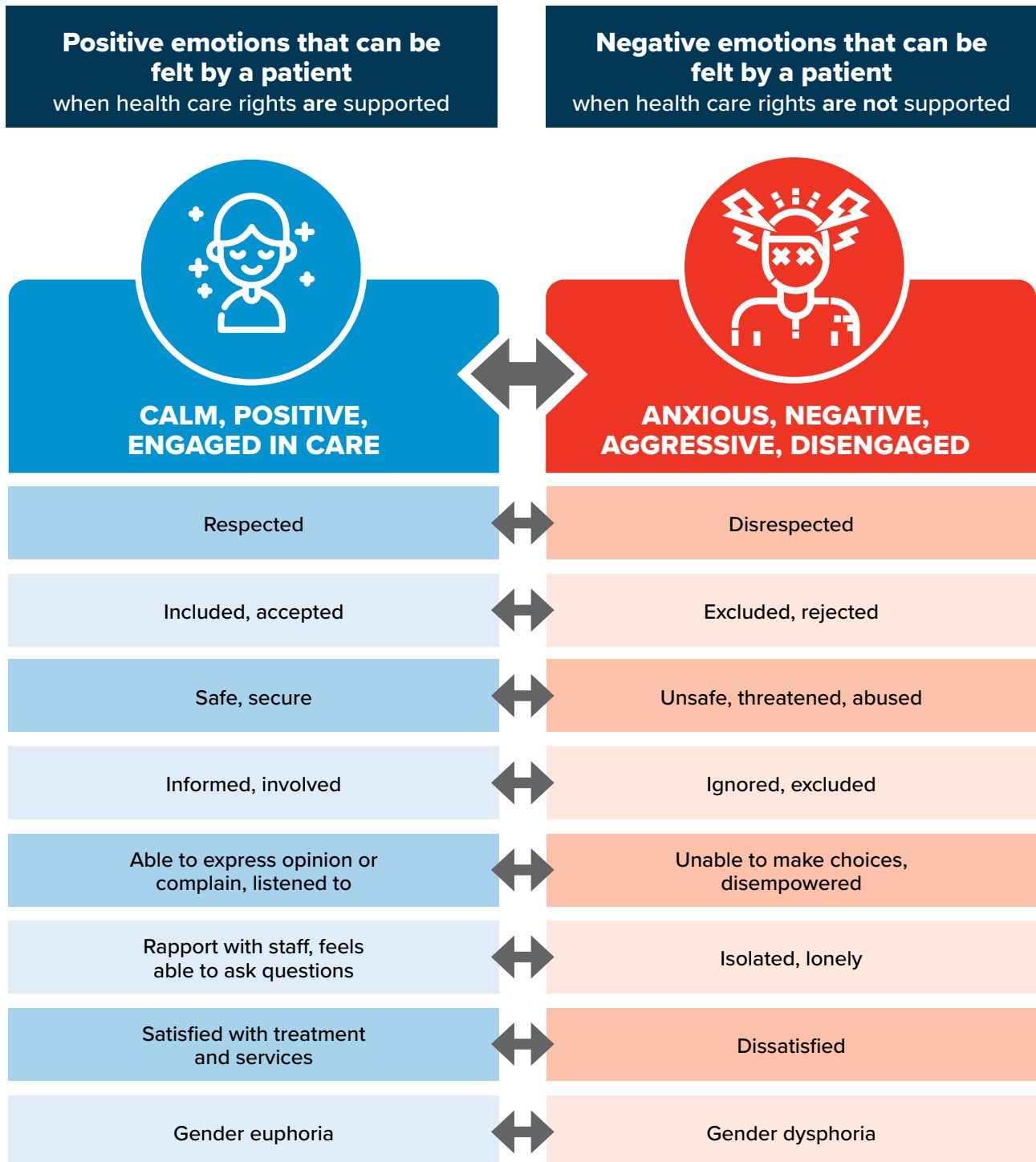
Collaboration and teamwork that is inclusive of carers, recognises and respects the role they play in care plans and discharge planning.

Further information is available in the:

- > [SA Health Partnering with Carers Policy Directive](#).

Health care rights

Using effective communication that supports a patient's health care rights can contribute to positive engagement, and conversely, negative emotions can arise when health care rights are not supported by good communication and person-centred care.



Supporting people with limited English proficiency

Providing Culturally and Linguistically Diverse (CALD) patients and carers with access to interpreters ensures information provided about their health care can be understood and gives them opportunity to ask questions and engage. This is an example of respect for their health care and language, and ensures their culturally diverse needs are met.

To work effectively with consumers from diverse backgrounds, you need some understanding of their cultural and language requirements.

Tips to support people with limited English proficiency:

- > Use an [accredited interpreter](#) (face-to-face or phone).
- > Organise [same-gender interpreters](#) where possible.
- > Do not use [colloquialisms or jokes](#) – as they may be difficult for non-English speaking consumers to understand. Humour is culture-based.
- > Explain the [reason](#) for your questions and procedures.
- > Introduce yourself and the [interpreter](#) to the consumer.
- > Brief the [interpreter](#).
- > Explain the [interpreter's role](#) to the consumer or carer.
- > Inform the consumer that the [interpreter service is free](#).
- > Assure the consumer that confidentiality is respected.
- > Talk [directly to the consumer](#), not the interpreter.
- > Speak in the [first person](#) (I, you) not third (he, she).
- > Keep [questions and sentences short](#), to allow adequate time for interpretation.
- > Use [plain English](#) and [avoid jargon and abbreviations](#). Not all words or phrases can be easily translated into other languages.
- > Use [simple, positive language](#). For example, ask “Did you get your medicine?” rather than asking “Didn't you get your medicine?”.

Supporting cultural awareness

Cultural awareness is being sensitive to the differences and similarities that exist between two different cultures, and using this sensitivity to effectively communicate with members of a cultural group. Cultural awareness is the foundation of cultural competence.

The use of Aboriginal health workers for Aboriginal and Torres Strait Islander people is an example of respect for their culturally diverse needs.

Culturally and linguistically diverse people may experience their identity in different ways. Some may identify more with traditional culture and some may identify more with western views.

Ask a patient or their family about their beliefs and traditions and work within their framework to enable participation and good communication.

Patients of health care services, families and carers, and the health care workforce itself display a wide range in culture, language, values, needs and health literacy that is found across Australian society. Different cultural groups may have a different understanding, interpretation and expectation of health care, including the role people play in their own health care.

If an interpreter is not available:

In the short term you can utilise cue cards to assist in basic communication. There are cue cards for different community languages/dialects on the website of Eastern Health, Victoria: www.easternhealth.org.au/site/item/481-cue-cards-in-community-languages

Caring for the gender diverse community

People who identify as gender diverse, non-binary or transgender.

When communicating and providing care to LGBTIQIA+ consumers and their families, the language that we use matters. Using someone's correct name and pronouns respectfully validates a person's gender identity, and means that a trustworthy, professional relationship can be built.

Mis-gendering a person can cause them psychological harm, known as gender dysphoria and limits the effectiveness of care we can provide. Taking care to affirm their gender can cause the reverse, and is known as gender euphoria, which are pivotal moments of happiness.

The use of pronouns (e.g. she/her, they/them, he/him) promotes honesty, inclusion and acceptance of all people, regardless of how they may identify.

SA Health staff are encouraged to communicate using pronouns, however should keep in mind that some people may not be comfortable disclosing such information.

For further information, visit the websites below:

- > [SHINE SA - Pronouns - fact sheet](#)
- > [Minus18 - the importance of pronouns - article](#)
- > [TransHub - gender dysphoria and euphoria - article and website](#)

Supporting people with limited health literacy

Effective information sharing and shared participation in health care decision-making ensures health care information is understood by the patient, carer and consumer and will not be an early trigger for the escalation of challenging behaviour.

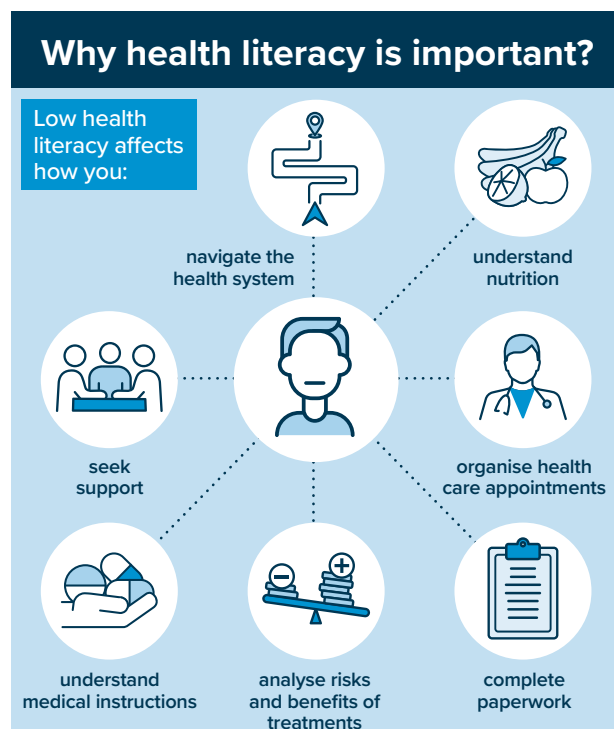
Effective information sharing techniques to support patients, carers and consumers with limited health literacy include:

- > using **simple language** (no technical jargon)
- > limiting information to **3 – 5 points at a time**
- > being **specific and clear**
- > using **visual aids** and demonstrating the information with pictures, diagrams and drawings
- > **summarising** and confirming the information is understood.

What does communication that supports information sharing and health literacy look like?

1. Provide time and space for the patient, carer, family or consumer to discuss any difficulties in understanding health information and services.
2. Inform the patient that they can ask family, friends or support services (such as translating services) for help with any communication difficulties.
3. Encourage patients to ask for more information about any part of care that is unclear.
4. Invite patients, carers and consumers to be open and honest with health care providers about medical history and medications.
5. Encourage patients, carers and consumers to become involved in the planning, design and delivery of health information and available services.
6. Create a health literacy environment that encourages patients, carers and consumers to improve their knowledge and skills by participating in education.

What is health literacy and why is it important? (Australian Commission for Safety and Quality in Health Care)



Specialised communication skills for de-escalation

De-escalating challenging or threatening behaviour is a specialised skill.

All workers will benefit from basic verbal and non-verbal communication skills at a minimum.

There are specialised approaches relevant to specific groups, for example:

- > **AGRO+** for Paediatric patients
Used by Paediatric emergency department staff and specific for use with agitated or aggressive young people.

Its element include:
A – Assessing what’s behind the anger
G - Gauge how you are feeling
R – Respond through engagement with conversation
O – Observe verbal and non-verbal cues
+ - plus positive reinforcement
- > Use of **personal safety plan or comfort plan** in mental health, and **Top 5** for dementia
- > **Diversional and sensory modulation techniques** are used in aged care and mental health
- > **Positive behaviour support and limit setting strategies** are used in mental health, disability and brain injury settings

Talk to your manager or Workforce Services about how you can build specialised communication skills for de-escalation.

Definitions

Health care rights

Everyone who is seeking or receiving care in the South Australian health system has rights about their care. Patients, consumers, carers, health care providers and health service organisations all have an important part to play in achieving health care rights and contributing to safe and high quality health care.

Health literacy

Health literacy is the level of a patient, carer’s or consumer’s understanding of information about their health and health care, and how they apply that information to their lives, and use it to make decisions that they act on.

Person-centred care

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Resources

eLearning resources

1. SA Health Digital Media – Aboriginal Cultural Competency
2. SA Health Digital Media – Partnering with Consumers and Community

South Australian legislation

1. *Carers Recognition Act 2005 (SA)*

SA Health policy

1. SA Health Charter of Health and Community Services Rights Policy Directive
2. SA Health and Wellbeing Strategy 2020 -2025
3. SA Health Equity of Access to Health Care Policy Directive 2020
4. SA Health Charter of Health and Community Services Rights Policy Directive
5. Respectful Behaviour Policy
6. Consumer Carer and Community Engagement Framework
7. Consumer, Carer and Community Feedback and Complaints Strategic Framework
8. Consumer Feedback Management Policy Directive
9. Consumer Feedback Management Guideline
10. Clinical Communication and Patient Identification Clinical Directive

Resources

1. Carers SA
2. Communication with people with disabilities Australian Federation of Disability Organisations
3. Charter of Health and Community Services Rights Policy
4. Australian Commission for Safety and Quality in Health Care
5. SHINE SA Fact Sheet
6. Minus18 - Article
7. transhub.org.au

Appendix

The Teach-Back method

One of the easiest ways to close the communication gap between health professional and consumer is to use the Teach-Back method. Asking what consumers recall and restate what they have been told is one of the top consumer safety practices.

Teach-Back is a way to confirm what the consumer understands, using their own words. It is a method that creates an opportunity for communication in which the health professional gives information, and then asks the consumer to respond and confirm their understanding before adding any new information. The health professional can then re-phrase if a consumer is not able to repeat the information accurately. The health professional can then ask the consumer to teach-back the information again, using their own words, until they are comfortable the consumer really understands it. If the consumer still does not understand, the health professional needs to consider other strategies.

It is helpful to use written/visual material (including pamphlets, diagrams, models) to reinforce the teaching points as a way to improve consumer understanding and appeal to different learning styles (auditory, visual and tactile learners).

Examples of suggested statements for health professionals to use the Teach-Back method are:

“I want to be sure I explained everything clearly. Can you tell me how you are going to take this medicine?”

“We covered a lot today about your diabetes, and I want to make sure that I explained things clearly. So let’s review what we discussed. What are three things that will help you control your diabetes?”

“What are you going to do when you get home?”

It is recommended that the health professional briefly documents, in the medical records/notes, what they have discussed with the consumer and what the consumer understands.

7 keys to successful communication

Good communication helps patients, their families, carers and consumers understand their care needs and to make decisions. Follow these simple steps for good communication.



1 Introduce yourself

Be welcoming, smile, use open body language, eye contact, positive posture and facial expressions. Be clear with your intentions.



2 Consider language and cultural needs

Ask if an interpreter is needed. Listen to the person's story.

Ask if any family members need to be included in conversations.



"Can you tell me how bad the pain in your stomach is?"



3 Use plain language

Keep sentences short.

Use words they use and check understanding.

Avoid jargon and acronyms.

4 Speak clearly and calmly

Check your tone, volume and intensity. Take your time and be patient.



5 Listen carefully and ask questions

Be present. Listen with care, patience, respect and empathy. Reassure, summarise back and clarify as needed.

Be self-aware of your responses based on your own cultural background, attitudes and values.



6 Limit content

Limit information to 3-5 points.

Watch their body language to check they are not feeling overwhelmed.

"We've got **one more test to do**. If it's ok, you can go home. If it's not ok, we'll talk about next steps".



7 Use visual aids

Draw diagrams, use pictures, brochures and models to help others understand.

For more information

SA Health

Workforce Services

Telephone: (08) 8226 6816

sahealth.sa.gov.au/challengingbehaviourstrategy



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