

3.3 COMMUNICATION

Communication refers to the transfer of information among individuals, groups, or organizations. Hospitalists communicate in multiple modalities with patients, families, other healthcare providers, and administrators. Patient-centered care requires that physicians and members of multidisciplinary teams effectively inform, educate, reassure, and empower patients and families to participate in the creation of a care plan. An estimated 80% of serious medical errors are due to failures in communication.¹ Preventable adverse events are a leading cause of death and injury in the United States.² Therefore, effective communication is central to the role of the hospitalist to promote efficient, safe, and high-quality care and to minimize discontinuity of care. Hospitalists can lead initiatives to improve communication among team members, patients, families, primary care physicians, and receiving physicians within the hospital and at extended-care facilities beginning at admission and through all care transitions.

KNOWLEDGE

Hospitalists should be able to:

- Describe key elements in a message.
- Describe the advantages and disadvantages of various communication modalities such as verbal, written, nonverbal, and listening approaches.
- Describe techniques of providing and eliciting feedback.
- Distinguish between formative and summative feedback.
- Define the role of effective communication in risk management.

SKILLS

Hospitalists should be able to:

- Communicate medical information in accordance with the recipient's preferred style with language understandable to patients, family members, and other care providers.
- Effectively use various communication methods, including nonverbal communication, in patient and family interactions.
- Identify and incorporate the use of appropriate multimedia resources to improve effective communication of the message.
- Use a medical interpreter when communicating with patients and families speaking a different language.
- Lead, coordinate, and/or participate in hospital initiatives to ensure adequate interpreter services and cross-cultural sensitivity.

- Identify potentially problematic family and team dynamics and explore their effects on the patient.
- Use advance care planning skills to identify the patient's choice of a surrogate decision maker.
- Ensure that input from surrogate decision makers accurately reflects the patient's interests, with a minimum of personal bias.
- Facilitate family meetings when necessary, collaborating with nurses and other team members to identify goals for the meeting, summarize conclusions reached, and use support staff as needed.
- Identify and provide a suitable and comfortable setting for family meetings.
- Counsel patients and families objectively when considering various treatment options.
- Communicate with nursing staff and consultants on a regular basis to convey critical information.

ATTITUDES

Hospitalists should be able to:

- Appreciate the positive impact that subtle changes in body language, such as sitting and appropriate touching, have on patient and family perceptions of an interaction.
- Demonstrate empathy for patient and family concerns.
- Demonstrate cultural sensitivity in all interactions with patients and families.
- Recognize the importance of allowing patients and families to have questions answered in a straightforward and timely manner.
- Discuss the patient's illness realistically without negating hope.
- Appreciate the importance of active and reflective listening.
- Acknowledge and remain comfortable with uncertainty in issues of prognosis.
- Remain available to the patient and family for follow-up questions through all care transitions.

References

1. Joint Commission on Accreditation of Healthcare Organizations. Joint Commission Perspectives: Joint Commission Center for Transforming Healthcare Releases Targeted Solutions Tool for Hand-Off Communications. Vol 32(8), 2012.
2. Kohn LT, Corrigan JM, Donaldson MS, eds; Committee on Quality of Health Care in America, Institute of Medicine. *To Err is Human: Building a Safer Health System*. Washington, DC. National Academy Press, 1999.