

**Communication Paper**

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## **Introduction**

Nursing has held the title of *Most Trusting Profession* for 20 consecutive years. There are numerous reasons why this recognition is given to this field due to their patient advocacy, compassionate care, ethics, and collaboration, but most important is their communication with clients. As a nurse, you are taught to use purposeful, professional ways of interacting with clients, called therapeutic communication. This skill provides emotional and psychological support to promote the healing of clients. The goal is to build trust and understanding through verbal and non-verbal cues to enable clients to feel safe and free to express their fears and thoughts in a comfortable environment.

Healthcare settings can be terrifying for clients depending on what brought them there, prior experiences, unfamiliar sounds, etc. can all make a person filled with anxiety. To have effective communication the nurse must create a conducive environment for the client. Providing privacy by shutting the door or pulling the curtain can aid in comfort and openness to confidentially express concerns. Having sufficient time for interactions to occur without interruptions or rushing conversation, and to be able to sit and actively listen can make a client feel more focused, valued, and understood by the nurse. These small things can foster trust, validation and address the patient's needs through a holistic approach to build rapport.

## **Analysis of Therapeutic Technique**

As a nurse begins their therapeutic approach with their client utilizing open-ended questions can encourage the client to share their experiences, feelings, and thoughts freely. This is a type of communication that prompts detailed responses which allows the client to fully express themselves. Instead of having "yes" or "no" answers, the client will be able to explore

their feelings in a more in-depth way. Questions as simple as “Can you tell me how you are feeling today?” can help a client feel heard. Utilizing this technique is especially useful when you are first assessing a client. You would be able to receive very detailed information about a topic if you were to ask, “Can you tell me more about that?” instead of questions like, “Are you in pain?”. This technique may be useful for those who have a hard time articulating their feelings. Open-ended questions create a safe space for clients to share difficult information and allow autonomy for what is important to them. This technique is especially important to facilitate a well-rounded assessment. Asking questions that require more information to be given, not only makes your client feel safe with you, but also allows you to gather complete information about your client’s physical, emotional, and psychological state to have a personalized-centered care plan.

While your client gives personal information, being able to reflect on what they may have just said can support their concerns and clarify their thoughts. Paraphrasing the client’s words can validate their feelings, promote self-awareness, and give you a deeper explanation of what they discussed. This technique is useful in situations where the client isn’t completely stating what they mean; if they tell you they aren’t sure their planned procedure is worth it, you may say, “It sounds like you are feeling anxious about the upcoming surgery”. Reflecting on the client’s feelings can enhance problem-solving by hearing their own words repeated back to them in a different light and help the client feel less isolated in their distress.

We can try our best to have optimum communication, but barriers may still reside. One of the most common obstacles that hinder communication, and the development of a trusting relationship are language barriers. This could be as small as using medical jargon that can

confuse the client or make it difficult for them to fully comprehend their condition and care, to as extreme as speaking different languages. Misunderstandings can lead to serious problems like ineffective care and incorrect diagnosis.

While verbal techniques are very important, non-verbal techniques are 80% of how we communicate. These cues can convey much more than what words can express. Facial expressions, gestures, eye contact, and open body language are crucial in expressing interest. Things like leaning forward show attentiveness and increase trust. While your client is telling you about their chief complaint you would want to maintain eye contact and nod your head to portray empathy and concern. You would also want to be aware of your tone of voice. You do not want to sound sarcastic or rude. You would ensure your pitch, pace, emotion, and volume are fit for the conversation and client understanding to promote comfort and a non-judgmental environment.

### **Reflection**

A strength I have with effective communication is accepting information. I find that I nod my head frequently and acknowledge people's thoughts well which can give assurance to that person's feelings. In a hospital or healthcare setting this will be very useful for clients who may feel overwhelmed and need enhanced emotional support. Another technique I think I do well is providing silence and maintaining eye contact. Yet, on the other hand, something I could work on is my body language. One of my "go-to" stances is having my arms crossed and swaying my body which could signal I'm closed off and uninterested in the conversation. I do it for the comfort of my "19 going on 90" hips, but my client will only perceive that as me being rude and unconcerned.

Ways I could improve my interpersonal communication would be to sit down beside my client to promote non-threatening body language and create a relaxed, more attentive atmosphere. Another way I could improve my therapeutic communication is by utilizing touch. Crossing my arms is something I do when I don't know what to do with my hands. Instead of doing this, while sitting next to my client I could use gentle touching to convey support and comfort in appropriate situations.

Challenges that could impede effective communication could be a client's anxiety levels making them less receptive to having a conversation. To work around I would maintain a comforting tone and offer a compassionate, understanding presence. I'd allow space and time for this client to not rush or force anything out of them that they are not ready to share. Another challenge could be if a client has cognitive impairments like dementia or altered mental status. These could prolong understanding or prevent the processing of information. To work around this, I would use simple terms, speak slowly, and repeat any information as needed. I would also give written information and educate a caregiver if present about treatment plans.

There are so many considerations to take into account when it comes to communication. Something that I will forever take with me is that once I've said something I can never take it back. I will always make it a point to make my clients feel as comfortable as possible, so they receive the care they need for success. Providing this comfort and safety will allow me to personalize their care for exactly what they may need.

## **Conclusion**

Therapeutic communication permits a healthcare team to receive crucial information for a client's treatment. Being able to ensure clients feel heard, safe, and respected by those caring for

them is what allows nurses to maintain their trusting reputation. Giving clients an environment best suited and tailored to their needs will provide healthcare professionals with the necessities for assessing, planning, implementing, and evaluating specific client treatments.