

# Therapeutic Communication Gerontology Assignment

Learning Objectives and Outcomes		
Area	Objective	Course Student Learning Outcome (CSLO's), Baccalaureate Essential's & QSEN
Knowledge	<p>Apply therapeutic communication nursing concepts in the delivery of nursing care to gerontology patients.</p> <p>Examine the influence of age on nursing care decisions and actions for patients.</p>	<p>CSLO Baccalaureate Essential VIII QSEN Patient-Centered Care</p>
Skills	<p>Apply therapeutic communication principles, concepts such as active listening, silence, focusing, open ended questions, clarification, exploring, paraphrasing, reflecting, restating, providing leads, acknowledgement, and offer of self.</p> <p>Increase their own self-awareness of judgments and pre-conceived notions that</p>	<p>CSLO Baccalaureate Essential VIII QSEN Patient-Centered Care</p>

	<p>may affect their advocacy for older adults.</p> <p>Evaluate effectiveness individual performance.</p>	
Attitudes	<p>Values the role of therapeutic communication in nursing care decisions and actions.</p> <p>Recognize personally held attitudes about working with patients from different age, ethnic, cultural and social backgrounds.</p>	<p>CSLO Baccalaureate Essential VIII QSEN Patient-Centered Care</p>

## Instructions:

This assignment is designed to help students feel comfortable initiating conversations with older adults and to raise awareness of older person's wishes, expectations, resources, cultural traditions, and strengths. Students will select an older adult to interview. Students will utilize therapeutic communication to explore the quality of life perceptions, risk the person is willing to take or has taken to preserve the quality of life.

Therapeutic communication is a fundamental component of nursing and is a complex concept. Ensuring positive encounters between nurses and patients is important for improving the quality of nursing interactions, performance of various nursing duties, and meet patients' diverse needs (Abdolrahimi, Ghiyasvandian, Zakerimoghadam, & Ebadi, 2017).

### Reference

Abdolrahimi, M., Ghiyasvandian, S., Zakerimoghadam, M., & Ebadi, A. (2017). Therapeutic communication in nursing students: A Walker & Avant concept analysis. *Electronic physician*, 9(8), 4968-4977. doi:10.19082/4968

National League of Nursing (NLN). Retrieved from <http://www.nln.org/professional-development-programs/teaching-resources/ace-s/teaching-strategies/aces-knowledge-domains/individualized-aging/examining-risks-and-benefits-to-enhance-quality-of-life>

## **Pre-assignment work-**

Students should answer the following questions to fully understand the quality of life, personal choice of decision making, and self-reflection.

1. Which of these two statements is most important to you?

- I want to preserve a good quality of life even if this means that I may not live too long.
- After working in a nursing home and now in a hospital setting with people of all ages, that have a simple virus to a chronic illness. I have unfortunately seen what suffering looks like, and it is not a quality of life I particularly want to have. Nor is this something I want my family to have to witness or burdened with my poor quality of life.

2. Do you feel you have full autonomy for decision making?

Yes, I feel I am about to make my own decision. However, depending on the topic, I like to include my husband and children.

3. How do you feel when people make decisions for you?

This normally upsets me; I feel disrespected.

4. What do you see as important in your life?

My two children and husband are the most important things in my life.

5. What risks have been identified to your quality of life that you agree or disagree with?

A risk that has been identified to my quality of life is world pollution, I do not agree with; I do my best to help the environment in any way I can.

6. What risks have you taken in the past and how has this affected you?

I took a risk four years ago to change jobs, to the hospital setting CNA. And it has affected me for the better. I have grown and learned so much in this profession. I have gained a great group of nurse friends that are all around great nurse role models.

7. What is your understanding of the risks you want to take now?

Getting my nursing degree was a risk for family and me. I have been a full-time CNA for many years, and never thought I'd go back to school at my age. However, it's always been my dream. After discussing it with the whole family, we were all will to take the risk. I dropped part-time at work, my husband took on my duties around the house, and my kids agreed to try and be more independent so that I could study. So this risk will ultimately improve our family's quality of life when I graduate.

8. What risks are you not willing to take?

Something I always wanted to do when I was younger was skydive; now with a family, it's just not a risk I'm willing to take.

9. How would you explain to the people who love you why you want to take this risk?

I would explain how the nursing school is only two years. It's been a dream of mine and something I feel called to do. I have a passion for wanting to help others. While I have been doing that for many years as a CNA, I want to do more.

10. What frightens you about taking this risk?

Nursing school is hard, what if I can't do it, what if I get finished and I can pass the NCLEX.

## **Interview process:**

Find an older adult to interview, the interviewee may be a family member and does not have to be a patient. Each interview should be a minimum of 20 minutes. Students should use therapeutic communication techniques to build therapeutic relationships within the community. Students should ask a minimum of 5 question listed below. A student may ask a question not listed below but will need to write down additional questions asked in the post-interview evaluation.

1. Which of these two statements is most important to you?

- I want to preserve a good quality of life even if this means that I may not live too long.

I want a healthy and good quality of life. I watched my husband suffer from Parkinson's and is something I never want anyone to have to live through.

2. Do you feel you have full autonomy for decision making?

Most of the time yes, however, sometimes I feel my daughter tries to make too many of my medical decisions. She's my power of attorney and a nurse, but I'm still human and want to be included in my care.

3. How do you feel when people make decisions for you?

It makes me feel like I don't matter like I'm a child again. It's hard when someone you raised and made all the decisions for as a child is now trying to make all your decisions for you. The rolls are reversed, I didn't realize what that might feel like.

4. What do you see as important in your life?

My kids, my grandkids, and my great grandkids. Also, my lord and savior Jesus Christ.

6. What risks have you taken in the past and how has this affected you?

I was an alcoholic for ten years, the worst ten years of my life. I regret every minute of it. I wasn't a good mother, it ended my marriage, and I'm lucky to be alive, honestly. But I got myself cleaned up I have been sober 48 years. I turned my life around; I went to college for the first time in my life and received my associate's degree. I'm now a drug and alcohol counselor and have been able to help others turn their lives around also.

## **Interview Evaluation-Reflective Activity**

After interviewing an older adult, students are to complete a self-reflective evaluation.

- 1) What therapeutic communication techniques did you use during the interview? Provide examples  
Some therapeutic communication techniques I used were eye contact, while I was getting the answers to my questions, I make sure to look and listen until the end, and I would summarize what she told me. I also used open-ended questions like, "tell me how you would feel if someone else made all your decisions for you?" I used to silence so show that I was interested in getting my answers, while she was talking.
- 2) What went well?  
I felt like I was able to get the answers I needed. I'm sure the last question was difficult to discuss; however, I was able to achieve respect and trust for her to open up about a difficult time in her life.
- 3) What would I do differently next time?  
Next time I would like to have a way to have more dialog between us, less like a question and answer section. I'm sure some had to do with being nervous.
- 4) What are the major take-home lessons after interviewing an older adult?  
Regardless of your age, you still want to be involved in your health care or life decisions. Don't think because they are older it doesn't matter.
- 5) How can I adapt my nursing practice to be more responsive to the unique needs of an older adult client?  
I believe it is essential to be sensitive to the unique needs of an older adult client. If this means taking the extra time to explain the pros and cons, or going over a procedure step by step. I want them to understand what is going on around them.
- 6) In what way am I building my nursing skills?  
Communication is a huge part of a nurse's job, whether they are talking to a patient, a patient's family member, or a coworker. But the therapeutic role is the most crucial part. Nurses need patients to open up and be honest with them about a subject they may feel embarrassed talking about. However, they need to gain their trust and the best way to do so with to show empathy through therapeutic communication.

STUDENT NAME \_\_\_\_\_

**RUBRIC FOR THERAPUTIC COMMUNICATION GERONTOLOGY ASSIGNMENT**

**Pre-Assessment**

<b>Objective</b>	<b>Unsatisfactory 0 points</b>	<b>Satisfactory 5 point</b>	<b>Grade</b>
<b>Increase own self-awareness of judgments and pre-conceived notions that may affect their advocacy for older adults.</b>	Description adequate with superficial thought and preparation; doesn't address all aspects of the task	Description well developed assignment that fully addresses and develops all aspects of the task.	
<b>Content Contribution</b>	Information that is off-topic, incorrect, or irrelevant to discussion.	Factually correct, reflective and substantive contribution.	
<b>Clarity &amp; Mechanics</b>	Communicates in manner with some 2-3 errors clarity, spelling, grammatical, or mechanics errors.	Contributes valuable information with minor 1 clarity, spelling, grammatical, or mechanics	

		errors.	
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**Comments:**

**Pre-Assessment POINTS: \_\_\_\_\_/15**

**Interview Evaluation-Reflective Activity**

<b>Objective</b>	<b>Unsatisfactory 0 points</b>	<b>Satisfactory 10 point</b>	<b>Grade</b>
<b>Evaluation therapeutic communication process with older adult</b>	Description adequate with superficial thought and preparation; doesn't address all aspects of the task	Description well developed assignment that fully addresses and develops all aspects of the task.	
<b>Content Contribution</b>	Information that is off-topic, incorrect, or irrelevant to discussion.	Factually correct, reflective and substantive contribution.	
<b>Clarity &amp; Mechanics</b>	Communicates in manner with some 2-3 errors clarity, spelling, grammatical, or mechanics errors.	Contributes valuable information with minor 1 clarity, spelling, grammatical, or mechanics errors.	

**Reflective POINTS: \_\_\_\_\_/30**

**Total Points: \_\_\_\_\_/45**

**Instructor Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

