Professional Communication Remediation

- Types of Communication
    - Components of nonverbal communication using vocal inflection: pitch changes can communicate doubt, suspense, confusion, and inquiry.
    - Components of verbal communication: sender, message, channels, receiver, response/feedback, noise
    - Components of verbal communication during initial assessment: communication & interpersonal skills, encompasses, clarity, brevity, adaptability
    - Making corrections using effective written communication: clear, immediately after interventions and never before, military time, factual, no opinions, correct spelling and grammar
- Therapeutic Communication
    - Appropriate therapeutic communication techniques for client education: active listening (SOLER), silence lets clients organize thoughts and think through points, leads help client verbalize and indicates interest
    - Nontherapeutic communication minimizing clients feelings: minimizing feelings misjudges degree of clients concern, shows lack of empathy or understanding, causes client to feel insignificant
    - Techniques for client communication by clarifying: clarifying facilitates understanding, restates basic message or acknowledges misunderstanding, confirms mutual interpretation of message
- Factors that Affect Communication with Individuals and Groups
    - Cultural factors that affect communication: bridging age gap, developmental skills, culture, trends, religious beliefs, methods, communication style, space, orientation
    - Demonstrating cultural awareness: understanding prejudices and preconceived notions about the present culture, understand cultural view of health/illness, understanding healing methods
    - Effective communication with older adults: slower processing, hearing and visual loss, speak loudly but don’t yell, concise explanations, pause for response, appropriate touch
    - Types of conflict when communicating among staff nurses: interpersonal conflict may lead to rudeness and lack of respect, resolution begins with yourself working with members of a team,verbal and nonverbal skills begin with self-awareness and sensitivity
    - Using collaboration to resolve conflict: each member is self-aware, each member communicates, not necessarily cooperation but members respect others opinions and are open, fair, and honest
- Client education
    - Evaluating factors affecting client learning: sensory deficits and physical deficits, lack of time or ineffective use of time, learning disabilities, literacy levels
    - Identifying factors to support learning: five factors of physical readiness: measures of ability, complexity of task, environmental effects, health status, gender; factors of emotional readiness: anxiety level, support system, motivation,

risk-taking behavior, frame of mind, developmental stage; components of experiential readiness: level of aspiration, past coping mechanisms, cultural background, locus of control, orientation; components of knowledge readiness: present knowledge base, cognitive ability, learning style (visual, auditory, tactile, kinesthetic)
    - Indicators of client understanding of teaching using domains of learning: cognitive domain: thinking domain, written materials, one-on-one discussion, audio visuals; affective domain: feeling domain, role playing, group discussion; psychomotor domain: skills domain, demonstration, encouragement, return skill demonstration
- Organizational communication
    - Effective intraprofessional communication: intraprofessional is communication between people from the same profession; collaboration on the same client; assertive communication is effective but difficult
    - Organizational structure and discussing progression of orienting nurse: structure forms when larger number of workers need a supervisor; size of group affects communication and decision making; larger organizations find difficulty with communication
    - Using SBAR: used to notify providers about condition of client; S= situation (identify self, unit, briefly discuss problem), B= background information (state client diagnosis, admission date, code status, medical history, summarize treatment plan), A=assessment (list VS, pain scale, any changes since previous assessment), R= recommendation (tell provider what you would like to have done/ordered)
    - Communication affecting relationships within an organization and actions to facilitate: types of organizational relationships are peer, superiors, and subordinates; communication channels can be diagonal (manager-manager), continual (superior-subordinate), or grapevine (3-4 people from any department, informal)