

## Nursing: Communicating effectively ... in English

*Vocational English for Nursing* is based on a holistic approach to nursing. This approach considers not only the physical but also the psychological, cultural, environmental and economic aspects of a disease and its treatment, as well as the impact on the patient and their family. Effective communication skills are essential if our learners are to understand their patient as a whole and accompany them through their treatment and beyond.

So what constitutes effective communication skills in a nursing context? Experts in nursing communications highlight the need for comprehensible pronunciation, active listening skills, nonverbal communication and the ability to bridge professional and lay language. To this skill-base we can also add written communication, and cultural awareness, which play a very important role in achieving effective communication in the healthcare environment.

Having established the essential elements of effective communication, let us now consider how these might translate into teaching English to non-native speaking nurses. Activities from *Vocational English for Nursing 1 & 2* will be used to help illustrate these points. As far as possible, such activities are authentic in task, exploiting authentic-style documents, to more closely reflect the working environment of the target audience.

### Verbal communication skills

Bridging the gap between medical and lay language means introducing strategies to help learners explain specialist procedures and interventions in a patient-friendly manner. It is also about familiarising the learner with language, such as euphemisms and colloquialisms commonly used by patients, especially those working in an English-speaking country. Patient education is an important aspect of the nurse's role, and learners should be aware of the language used in leaflets and on websites directed at patients. Communication with other healthcare professionals also requires a certain level of comfort when employing medical terminology.

**Taking a blood sample**

**Vocabulary 1** Work in pairs. Match 1-7 in the illustrations to words a-g.

a) antiseptic wipe \_\_\_  
 b) cotton ball \_\_\_  
 c) needle \_\_\_  
 d) plaster \_\_\_  
 e) specimen tube \_\_\_  
 f) syringe \_\_\_  
 g) tourniquet \_\_\_

1. High frequency nursing procedures, such as taking a blood sample are often a good place to start to introduce medical terminology. Learners can draw on their own experience to help them label the equipment used for a particular procedure before moving on to develop the necessary patient instructions to carry out the procedure.

### MMR information leaflet

#### What is MMR?

The MMR vaccine protects your child against these highly infectious childhood diseases: measles, mumps and rubella.

#### What are the symptoms?

- measles: cough, fever, rash, runny nose and sore throat
- mumps: fever, headache, nausea and swollen glands
- rubella: fever, headache, rash (red-pink colour), runny nose, sore throat and swollen glands

#### When to give the vaccine

- When your baby is 13 months old, make an appointment with your family doctor or public health nurse for the first MMR vaccine.
  - At 4–5 years your child will receive the second vaccine (or booster) at school.
- The vaccines are free of charge.

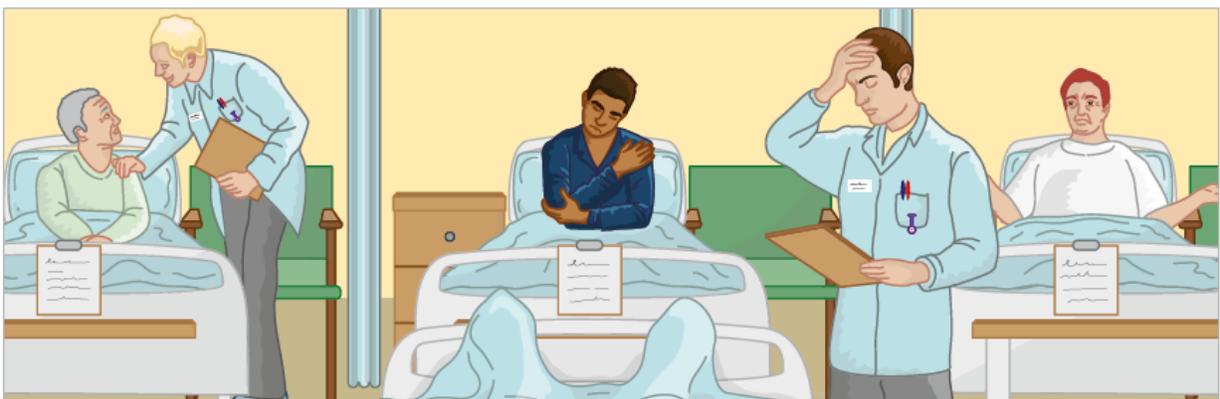
#### What happens after the vaccination?

Does your child have a fever? Is the injection area sore, swollen or red? If yes, give your child paracetamol or ibuprofen.

2. Use of authentic documents is essential when preparing learners to function effectively in an English-speaking environment. Patient education leaflets are generally written in plain English, and as such are ideal for use in the nursing English classroom even at low levels. They provide a valuable source of key vocabulary including patient terms such as 'measles' and 'mumps'. This vocabulary can then be exploited in a number of different ways, including language awareness activities, role-play to practise advising patients or even a simple comparative discussion.

### Nonverbal communication skills

It is important for learners to increase understanding of their patient's physical and emotional signs (expressions of anger, melancholy, etc.), as these may give vital clues in terms of their well-being or state of mind. Nurses must also be careful to mirror their own verbal communication with appropriate body language and/or nonverbal communication.



After discussing the qualities of a responsible nurse, consider asking learners to look at a scene from their own workplace or a picture such as the one above. Ask learners to describe the nonverbal qualities that they notice in their colleagues/nurses in the picture and report back to the rest of the group. In this example, touch is used to accompany expressions of reassurance. Touch, of the most acceptable areas, e.g. shoulder or arm, is considered one of the most universal ways of communicating care.

### Active listening skills

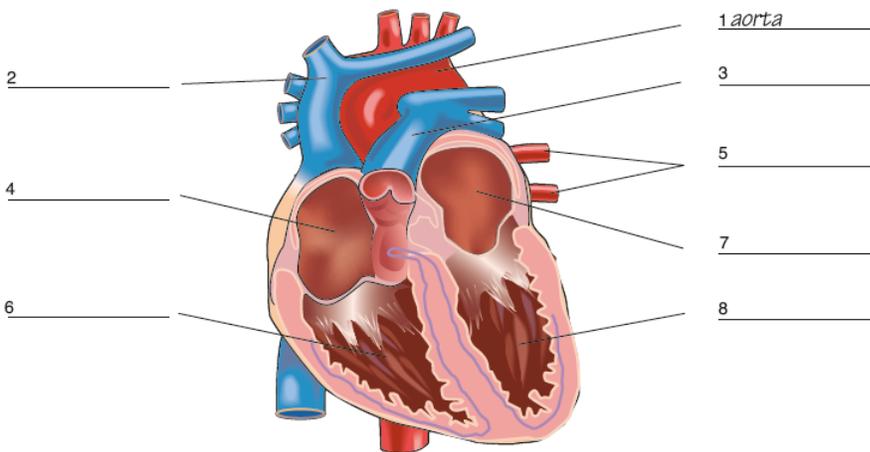
Active listening means showing the patient that the nurse is really listening to him or her. Learners should be trained to use encouraging expressions, such as 'I see' and 'go on' or sounds like 'uh-huh?', as well as nonverbal signs such as nodding or smiling warmly. Use of silence and repeating the patient's words are also useful techniques to help to ensure a successful interaction.

- Staff Nurse: Is there <sup>1</sup>\_\_\_\_\_, Ms Sonoda; you look a bit worried?  
(*smiles warmly*)
- Ms Sonoda: Erm, (*long pause*) I'm sorry; it's very embarrassing for me to talk about.
- Nurse: Don't worry, <sup>2</sup>\_\_\_\_\_.
- Ms Sonoda: I have some pain.
- Nurse: Pain?
- Ms Sonoda: Yes, I have pains, just here when I go to the toilet and then it stops.
- Nurse: <sup>3</sup>\_\_\_\_\_ what you mean?

By including stage directions, e.g. (*smiles warmly*) or (*short pause*) in a conversation, learners can see immediately how and when active listening skills and effective nonverbal communication can be incorporated successfully. Encourage learners to write their own conversations complete, with stage directions, to help them assimilate these into their own exchanges with patients, visitors and colleagues.

### Voice management

Accurate pronunciation is essential in ensuring safe practice, e.g. when relaying patient data or test results over the phone. However, managing the voice also means using appropriate pitch and intonation, which helps towards establishing and maintaining rapport with the patient. If a nurse's tone of voice does not match his or her language, then efforts to employ the correct phrases to empathise with the patient, for example, are wasted. This aspect of voice management is especially pertinent when dealing with native English-speaking patients, where tolerance of inappropriate intonation patterns may be lower.



1. Depending on your learners, some may already be familiar with certain medical terms from their L1 (Latin-based) languages. However, many will place the stress in the wrong place. Activities such as this will help promote more accurate pronunciation, which will in turn facilitate communication with colleagues and patients.

**Pronunciation 11**  14 Listen and complete these sentences.

- 1 If you feel \_\_\_\_\_, let me know. (Y / N)
- 2 If you feel \_\_\_\_\_, tell me. (Y / N)
- 3 If you feel \_\_\_\_\_, let me know. (Y / N)
- 4 If you feel \_\_\_\_\_, tell me. (Y / N)

2. Nurses spend a lot of time trying to reassure their patients. This activity demonstrates the importance of tone of voice when communicating with patients. By asking learners to listen to different intonation patterns, they are encouraged to then consider their own voice management and make use of patient-friendly intonation.

### Cultural awareness

Being sensitive to people of different cultural backgrounds is essential to the success of the nurse-patient relationship. However, nurses also need to be aware of other aspects of culture: the professional nursing culture, and the medical and ethical beliefs of the country in which they are practising or are about to practise. They should also be aware of the possible impact of their own cultural background and beliefs on their interactions with patients, visitors and colleagues.

**Reading 1** Read the extract from a patient information leaflet from the Central Hospital in Phoenix, Arizona in the USA. What is the average waiting time ...

- 1 for a patient in ER in Central Hospital?
- 2 for a patient in ER in the State of Arizona?

## Central Hospital

**What to Expect**  
Highly skilled and experienced emergency medical staff are on hand 24 hours a day, seven days a week to provide essential emergency care at the Central Hospital Emergency Room (ER).

**The Triage Process**  
At the ER, we treat patients whose lives are in danger first. A special nurse 'sorts' the other patients and puts them in order according to how bad their symptoms are. This is called triage.

**When you arrive, this is usually what happens:**  
You check in at the <sup>1</sup> \_\_\_\_\_ .  
You give your name, address and <sup>2</sup> \_\_\_\_\_ , etc.  
You wait in a <sup>3</sup> \_\_\_\_\_ .  
A <sup>4</sup> \_\_\_\_\_ carries out some basic tests (pulse, heart rate, etc.)  
He / She asks you some questions and makes an initial <sup>5</sup> \_\_\_\_\_ of your condition.  
He / She decides the <sup>6</sup> \_\_\_\_\_ of care of all the patients in his / her charge.  
The doctor visits you in the <sup>7</sup> \_\_\_\_\_ as soon as he / she is available.

**The Order of Care**  
We treat patients in order of priority:  
Emergency (life-threatening) conditions, e.g. <sup>8</sup> \_\_\_\_\_ .  
Urgent problems, e.g. <sup>9</sup> \_\_\_\_\_ .  
Non-urgent problems, e.g. <sup>10</sup> \_\_\_\_\_ .

**Waiting Times in ER**  
If your condition is not serious, you may have to wait before seeing a doctor in ER. However, our policy is to give quality care as soon as possible to all our patients. That is why at Central Hospital patients typically spend two hours less waiting in ER than the state average of 4.5 hours.

1. An extract from a US patient educational leaflet explains the triage process used to prioritise a series of patients at ER. This activity provides an insight, not only into the medical culture of the US but also into the professional nursing culture; it outlines some of the responsibilities of a US nurse, which may differ from those in the learner's own country.

2. Understanding the local 'patient culture' prepares the learner for working in an English-speaking environment. The following - Patient: '*Please call me Jack*' - indicates the patient's preferred name. Some patients in the UK/US feel more comfortable when medical staff use their first name, favouring an informal contact, while others like to maintain a more formal relationship and might ask staff to use their title and family name. Confirming this basic detail from the beginning helps the nurse to establish and maintain rapport with the patient.

### Written communication

Written communication is also part of the daily nursing routine, e.g. filling in charts and documents, updating patient records. Learners therefore need to write clearly and coherently and use accurate spelling. They also need to possess a knowledge of accepted medical terminology, abbreviations and acronyms in order to avoid potential fatalities.

Patient name: <i>Alberto Riviera</i>							
Date/ Time	BP	P	RR	T	Wt	O <sub>2</sub> Sats	Signature
<i>14.10.11</i>	<i>130/80</i>	<i>75</i>	<i>15</i>	<i>37</i>	<i>71 kg</i>	<i>96%</i>	<i>R. Perez</i>

Taking vital signs (temperature, pulse, etc.) and completing the patient record represent high-frequency procedures for nurses. Learners should therefore be given plenty of practice of this type of activity to familiarise them with the abbreviations and acronyms currently in use.

### '3-D' characters and case histories

- 1 Mrs Anita Naidu doesn't like blood and she sometimes feels dizzy. She has three grandchildren and she likes to talk about them – a lot.

**Case History:** Ms Annabelle Driver, 34, is recovering from varicose vein surgery. The patient is unemployed and a single parent with two teenagers living in a deprived area. She suffers from asthma and has a BMI of 30. Because of her weight, the patient finds it difficult to exercise. Ms Driver has also suffered from mild depression in the past.

Training nurses to communicate effectively means providing real-world scenarios and patients with fully-rounded characters that will allow learners to put *all* their acquired skills into practice. '3-D' characters (including information about the personality or social history of the patient) and case histories provide details about the characters that allow learners to understand the patient as a whole. As a result, interactions between the nurse and the patient become immediately more relevant, bearing a closer resemblance to reality, and as such will go one step further towards preparing learners for the outside world.

### Teacher's notes

Finally, the Teacher's notes that accompany *Vocational English for Nursing 1 & 2* provide essential information for those trainers who are non-experts in the field of medicine. The notes serve not only as guidance in terms of the medical content, but also provide a rationale behind the patient management techniques covered in the unit.

Patients spend more time communicating with nurses than with any other healthcare professional. It is widely accepted that building and maintaining a good patient relationship is an essential aspect of the treatment and healing process. And key to achieving this is effective communication skills.

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**Ros Wright** is co-author of *Vocational English for Nursing 1 & 2* (Pearson, 2010, 2012), a course based on a holistic approach to nursing that prepares learners to function effectively in an English-speaking environment.