Innovative Approach to Nurse-Patient Communication: Supporting Therapeutic Relationships

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Innovative communication process

Initialization phase of the process.

• Collection of information in the process.

- Assessment, intervention, and planning in the process.
- Conclusion of communication in the process.

1. Initialization phase



First impression is crucial for gaining patient's cooperation

✓ Build a good therapeutic relationship.

Don't Forget these basic Rules!

- To ensure proper verbal and nonverbal communication,
- To respect GDPR (space for privacy),
- To Emphatize (listen, understand, be empathetic),
- To Focus on a patient.



1. Initialization phase



Common Mistakes!

- (2) failing to secure privacy,
- aisregarding GDPR,
- poor signals in non-verbal and verbal communication (incorrect posture, facial expression, voice, conflict, interrupting, talking over),
- inappopriate comments, bias prejudice,
- Examples attending to other patients, etc.).

2. Collection of information



Find out the reason why the patient sought help

✓ Prevent ineffective communication tactics.

Don't Forget!

- To adapt communication to age, health and mental state, educational level, and cognitive status,
- To respect personality, individual approach, religious beliefs, sexual orientation, etc.,
- To use short standardized sentences.



2. Collection of information



Common Mistakes!

- Failing to adapt communication to age, health and montal state, educational level, cognitive status,
- Disregarding the patient's personality, religious values, forget ethical and moral code.
- Disregarding the problem the reason why the patient sought help,
- cover use of technical terminology, language barrier,
- not following the current standard

3. Assessment, intervention, and planning

The patient feels that the nurse is fully devoted to him and he is important

- ✓ Assess the health status and rule out warning signs.Don't Forget!
- To intervene, or to plan intervention,
- To assess patient's self-sufficiency, social status,
- To determine the state of motivation,
- To consider comorbidities that make the patient more vulnerable,
- To conduct a conversation about intentional change of problematic patient behaviour and their acceptance of risk.





3. Assessment and intervention

Common Mistakes!

- failing to rule-out warning signs,
- not asking for feedback,
- disregarding the individual dispositions of the patient (limitations of hearing, vision, cognitive status...)
- not allowing communication with a support person,
- not ensuring the continuity of nursing care,
- not educating.





4. Conclusion of communication Slovak chamber of nurses



Nurse concludes the conversation with: "Do you have any more questions?"

✓To ensure continuity of care, find out the satisfaction of the cared-for person.

Don't Forget!

- To verify that a patient understood the subject of the conversation,
- To provide written notes, e.g.
 appointment dates to the patient or a
 support person,
- To hand-out educational materials that can be reviewed at home, phone numbers, etc.



Goal of the innovative approach in communication

Ensure continuity of nursing care.

Motivate the patient towards desired change.



Prevent ineffective communication errors and tactics.

Proactively reduce the number of complaints against outpatient nurses.



By adopting this procedure, we can avoid communication errors and reduce potential conflicts in the nurse-patient relationship

80 %
of complaints
in outpatient
SaPA



Our goal - 0 % of complaints in outpatient SaPA



Thank you for you attention!

It is important to continually remind ourselves of the ethical code, care for marginalized groups, without attacks or inappropriate comments on race, nationality, religious beliefs, sexual orientation, and similar, because SaPA should remain empathetic and helpful to all groups of people.