Medical Xpress

Study shows poor prognosis when medicos don't communicate

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A new study of hospital emergency rooms has shown how communication breakdowns between patients and medical staff can lead to problems in treatment delivery and potentially reduced patient safety.

Conducted by the University of Technology, Sydney in collaboration with five NSW and ACT hospitals, the research was carried out over three years, involved more than 1000 hours of direct observation, 150 interviews and included audio recordings of 82 patients during their consultations.

Lead researcher Professor Diana Slade said it was one of the largest projects internationally of its kind and had provided evidence of how miscommunication between doctors and patients affects their understanding of a diagnosis and their compliance with treatment, revealing a need for better training of emergency department clinicians.

She said the research collaboration had offered insights that would assist hospitals and health providers to overhaul processes and procedures to better manage communication with patients and offer scope to train staff to communicate in new, more effective ways during critical situations.

"Our research presents a detailed picture of the importance of communication in the delivery of effective patient-centred care and provides a detailed analysis of the way in which communication occurs and how at times it fails," Professor Slade said.

"This and past research has demonstrated that perceptions patients form about hospitals are largely influenced by how staff communicate with them and how well their condition is explained. Many of the complaints they level against hospitals arise from poor communication and failure in being understood.

"From the research one can surmise that prolonged hospital stays, misdiagnosis, unnecessary suffering and potentially fatal incidents can arise in hospital emergency rooms due to communication breakdown."

Patient visits to hospital emergency departments in Australia have been increasing on average by 4.9 per cent each year since 2003/4, with more than seven million presentations being made to emergency departments in 2010 alone.

Professor Slade said 235,037 patient presentations were made to the five emergency departments participating in the UTS study in that year.

"The ever increasing pressures on hospital staff in the face of such rising numbers of patients will inevitably further strain communications in emergency departments," Professor Slade said.

"Communication in hospital emergency departments is complex. Emergency medicine is a largely spoken discipline and the combination of time pressures, increasing presentation loads and an expectation that clinicians work in multidisciplinary teams, means spoken interaction now carries a greater burden.

"Patients are 'told' about their diagnosis, are 'told' about their treatment plans and continuity of their care, with little reliance on written modes of communication. This now happens in a more pressurised time frame, often resulting in inadequate transfer of information about the patient. Factors such as different cultural, linguistic and socio-economic

backgrounds and experiences also add to the complexity."

The research shows that two broad areas of communication have an impact on the quality of the patient journey through an emergency department – how medical knowledge is communicated and how clinician-patient relationships are built.

"Clinicians must communicate care effectively," Professor Slade said. "Clinicians must create an interpersonal relationship and build rapport with the patient. Strategies and skills in both communicating medical knowledge and in building interpersonal relationships must become a required component in the training and assessment of emergency department clinicians."

More information: Reports at: www.rilc.uts.edu.au/projects/e … y-communication.html and www.rilc.uts.edu.au/projects/chec.html

Provided by University of Technology, Sydney

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