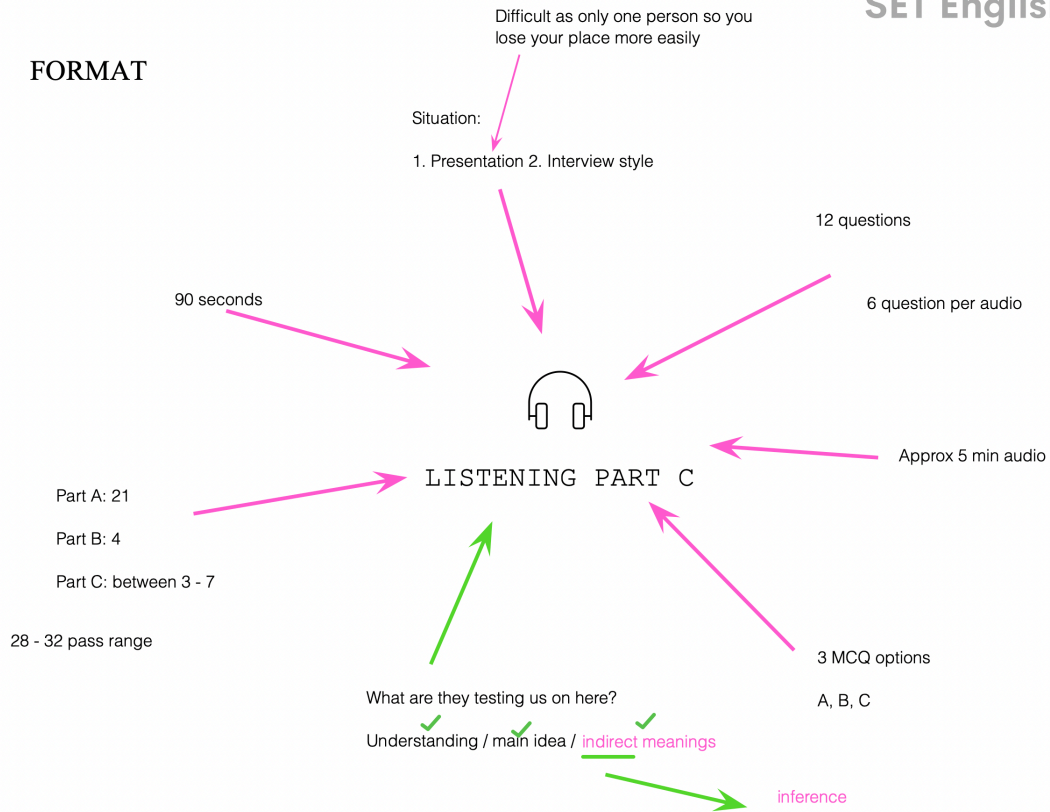


1 Format

2 Technique

3 Practice

FORMAT



Technique: Signposts

You hear a hospital doctor called Dr Keith Gardiner giving a presentation about some research he's done on the subject of staff-patient communication.

You now have 90 seconds to read **questions 37-42**.

37. Dr Gardiner first became interested in staff-patient communication after
- (A) experiencing poor communication as an in-patient.
 - (B) observing the effects of poor communication on a patient.
 - (C) analysing patient feedback data on the subject of communication.
38. What point does Dr Gardiner make about a typical admission to hospital?
- (A) The information given can overwhelm patients.
 - (B) Patients often feel unable to communicate effectively.
 - (C) Filling in detailed paperwork can be stressful for patients.
39. Dr Gardiner uses an example of poor communication to illustrate the point that
- (A) patients should be consulted about the desirability of a hospital stay.
 - (B) specialists need to be informed if there are any mental health issues.
 - (C) relatives' knowledge of a patient's condition shouldn't be taken for granted.
40. Dr Gardiner explains that a survey conducted among in-patients about communication
- (A) measured the difference between their expectations and their actual experience.
 - (B) asked their opinion about all aspects of the service they received.
 - (C) included questions on how frequently they visited the hospital.

M: Good morning. My name's Dr Keith Gardiner, and I'd like to talk to you today about some research I've been involved in, concerning something that affects all health professionals – staff-patient communication.

Now, firstly, let me reassure you that in feedback, patients seem positive about the way information is communicated to them. But I recently decided to explore the issue in more detail when I was in a hospital with a patient and witnessed for myself what can result when a health care professional assumes they've made themselves clear to a patient, when in fact they've been anything but. Luckily, I've had very few complaints made against members of my team, but the potential is certainly there.

So first, let's start by looking at a typical hospital admission for an in-patient, and the first communication they have about any procedures they are to undergo. On arrival, a patient will complete necessary paperwork. Various staff will talk to them about their treatment during their stay, which is designed to reduce patient anxiety. However, from some patients' point of view, this interaction can seem very complex and difficult to take in, especially at a time when they're not at their best physically or mentally. So it's doubly important to check that any communication has been understood.

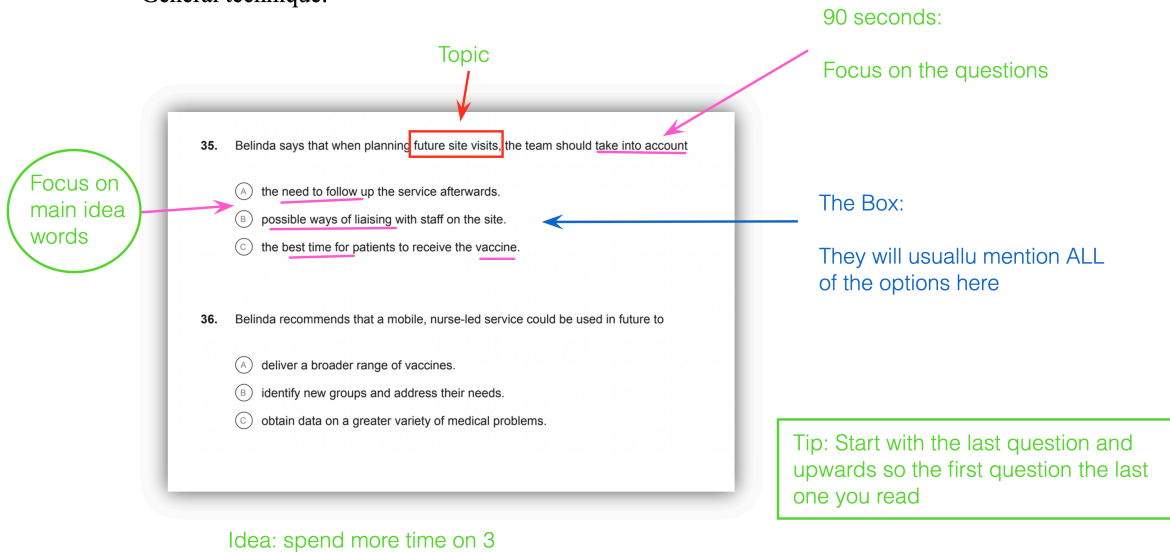
Now, to illustrate what I'm talking about, let's take a hypothetical situation. I often use this because it highlights the potential consequences of poor communication. A man in his eighties is admitted to hospital, despite his protestations, with ongoing severe back

pain. On investigation, it's found his cancer has spread. The outlook is poor - and further compounded by his becoming depressed and refusing to eat while in hospital. A feeding tube is inserted, a procedure which the patient complies with, but which his family members query. The doctor on duty updates them, assuming they're aware of the severity of the patient's condition – when in fact no such prognosis has been shared with them. An extreme case, but a plausible one, nevertheless.

In order to find out exactly what in-patients felt about the service they were receiving in this hospital, we conducted a patient survey. The questions were carefully targeted to capture patients' opinions about the effectiveness of the communication they'd been involved in during their stay. The survey questioned patients on both what they had expected prior to admission, and what their stay was really like. These two scores were then used to calculate what's called a 'gap' score. The survey also included questions to measure the patients' behavioural intention – that is, how willing they would be to return to the hospital for treatment. Patients completed the survey themselves, and results were then processed with the help of medical students.

Now, the survey produced some interesting data about communication, including both praise and complaints. Clearly in a hospital situation, staff are dealing with confidential and sensitive information, which must be communicated in private – a situation which can be difficult to achieve in a large and busy hospital. However, we scored highly on that point. And we were also pleased to note that staff did manage to communicate in a manner that treated patients with dignity and respect. Of course, staff also have to ensure patients fully understand what's been said to them. And this last point's where we received the most negative feedback. Both patients and relatives noted a tendency for professionals to resort to the use of jargon, and complex terms when explaining both diagnoses and procedures, which left some patients confused. However, patients were generally satisfied with the information about any follow-up treatment provided after discharge.

General technique:



35. Belinda says that when planning **future site visits**, the team should take into account

- (A) the need to follow up the service afterwards.
- (B) possible ways of liaising with staff on the site.
- (C) the best time for patients to receive the vaccine.

36. Belinda recommends that a mobile, nurse-led service could be used in future to

- (A) deliver a broader range of vaccines.
- (B) identify new groups and address their needs.
- (C) obtain data on a greater variety of medical problems.

Focus on main idea words

Topic

90 seconds:
Focus on the questions

The Box:
They will usually mention ALL of the options here

Tip: Start with the last question and upwards so the first question the last one you read

Idea: spend more time on 3

Tip 2: Don't jump on the first thing you here. Listen to all first. Delay your judgement.