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## Communicating Quality and Safety in Health Care

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As health services are becoming more complex, communication is critical to enable healthcare clinicians to provide safe and high-quality care. In response to the growing emphasis on clinicians' capacity to practise effective communication, *Communicating Quality and Safety in Health Care* provides real-life communication scenarios and inter-professional case studies. The book engages healthcare trainees from across medicine, nursing and allied health services in a comprehensive and probing discussion of the communication demands that confront today's healthcare teams.

This book explains the role of communication in mental health, emergency medicine, intensive care and a wide range of other health service and community care contexts. It emphasises the ways in which patients and clinicians communicate, and how clinicians communicate with one another. The case studies explain why and how communication is critical to good care and healing. Each chapter analyses real-life practice situations, encourages the learner to ask probing questions about these situations, and sets out the principal components and strategies of good communication.

Written by prominent and internationally renowned scholars, *Communicating Quality and Safety in Health Care* helps both learners and instructors contextualise the practical exemplars by identifying the connections to relevant accreditation and policy requirements.

Additional resources for instructors are available online at [www.cambridge.edu.au/academic/qualitysafety](http://www.cambridge.edu.au/academic/qualitysafety)

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Edited by  
**Rick Iedema   Donella Piper   Marie Manidis**



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## Foreword

In my previous role as Director General of NSW Health and, more recently as Chief Executive Officer of the Australian Commission on Safety and Quality in Health Care, I have reviewed many serious adverse events. These events, leading to serious patient harm, were frequently precipitated by inadequate communication between clinicians, and between clinicians and their patients.

Over the years, I have listened to many patients and their families tell stories about their healthcare experiences. Whether their experiences were positive or not often depended on the quality of communication they received from clinicians. This included the type of information, how they received that information and the interactions they had with their clinicians.

We know that communication problems are a major contributing factor in serious adverse events. As a result, there has been a great deal of effort in Australia and internationally to understand the genesis of communication failures as a strategy to improve the effectiveness of communication, reduce preventable patient harm and increase patient satisfaction in their care.

Effective and respectful communication is critical to the quality and safe delivery of patient care. Achieving this is not a simple task, as the system in which health care is delivered is complex. Clinicians require highly developed communication skills to negotiate this complexity. Clinicians need to develop these skills from strong evidence base, starting at undergraduate level.

This textbook, edited by three leaders and researchers in this field, provides an excellent evidence base for students to start developing their communication skills. Each chapter has been written by prominent and internationally renowned health educators, practitioners and scholars. The textbook presents theories, useful strategies and tools to assist clinicians to communicate effectively in various clinical scenarios and settings. Clinical scenarios are illustrated with real-life examples, contextualised to the Australian setting. These examples will have resonance with readers, providing both context and relevance to their own practice, thus enhancing their learning opportunities.

This textbook is an important foundational resource for undergraduate healthcare students to develop the knowledge and skills to communicate effectively across service sectors, clinical specialties and clinical situations. It highlights the importance of respect, ethical practice, honesty, openness and patient centredness as essential elements of effective communication. In addition, the textbook provides useful patient-centred communication strategies and tools about how to partner with patients in shared decision making, informed consent and open disclosure.

Understanding the needs of patients and providing patient-centred communication will not only increase satisfaction but minimise distress and potentially reduce patient harm.

Adjunct Professor Debora Picone AM  
Chief Executive Officer  
Australian Commission on Safety and Quality in Health Care

## Foreword

Over the past decade, I have listened to the healthcare experiences of health consumers. Healthcare consumers, who come from all walks of life, who as patients, family members and carers of patients, trust that their healthcare professionals will act in their best interests at all times.

As a facilitator at forums, and as a healthcare consumer advocate, I have listened to people recount their healthcare experiences. I have listened to unsolicited personal accounts of healthcare experiences from people while waiting at bus stops, while sitting on airplanes, and in the supermarket checkout line. I have listened as healthcare experiences are relived. And, regrettably, people's experiences had been less than optimal.

The experiences I hear about are those of people as patients being traumatised by the healthcare system. They, or the person they cared for, had experienced harm in the course of receiving their health care.

It is evident that, despite the differing healthcare settings and the specific healthcare needs of each person, there are commonalities across these experiences.

Many patients had alerted members of their healthcare team to their changing health status. Family members had informed healthcare staff of their family member deteriorating, before their very eyes. There were reports of 'raising the alarm' that 'things were amiss' or 'just weren't 'right''. All the expressed concerns were subsequently dismissed by the health professionals caring for them.

The most significant recurring theme was of not being listened to, not just once, but repeatedly. Not only did I recognise these themes, I myself had experienced them all too well when my son died in hospital twelve and a half years ago.

Regardless of their healthcare need or the setting health care is provided in, people come to health care as patients with a reciprocal expectation of trust. Trust is really the only lifebuoy that a patient has to hold on to in the tumultuous ocean of health care. Each interaction a healthcare provider has with a patient, no matter how brief, builds on that trust or erodes it. When patients are not listened to, or are objectified as just a body part, physical and/or psychological harm are the inevitable outcome.

I often hear it said that patients expect too much these days. Each one of us as a human being innately expects to be valued and treated with respect by another, whether that is in our daily lives, our workplace or within the interaction we have with our healthcare providers. A personal responsibility to valuing and respecting the patient as a person and authentically listening and hearing their voice enables the atmosphere for trust to grow.

It is widely accepted now that patients play a key role in their own safety and in the mitigation of harm and also in their own care and healing. Their insights can also inform improvements to both the safety and quality of overall healthcare provision.

Not only do patients bring a unique perspective, but they also provide the missing link to the improvements required to the overall safety and quality of health care. The progress of this improvement depends on optimising the communication between all healthcare professionals and the people that they care for.

This book makes a welcome and timely contribution, as a resource to attain the environment that enables healthcare providers to maximise their interactions with patients in ways that matter to patients and increase the safety and quality of the care they receive.

Stephanie Newell  
Australia's Patients for Patient Safety Representative  
to the World Health Organization

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**Christine Jorm** is based at Sydney University. She has doctorates in neuropharmacology and sociology and worked as an anaesthetist for more than 15 years before moving to full time work in patient safety and quality. Her book, *Reconstructing medical practice: Engagement, professionalism and critical relationships in health care* (Aldershot: Gower Publishers, 2012) suggests that doctors' delicate self-esteem, collegiate relationships and cherished connections with patients reduce their ability to admit to error or engage with the system. Christine's range of publications reflects both the complexity inherent in safety and her enthusiasm for interdisciplinary collaboration. After four years assisting medical students to develop professionalism, her current work is focused on interprofessional and interdisciplinary education.

**Benn Lancman** is a specialist anaesthetist and human factors specialist. Benn served as a junior doctor representative with the Clinical Excellence Commission in NSW, and currently has an appointment at the University of Sydney in the Workforce Education and Development Group working on projects that impact trainee performance and the acquisition of expertise. Benn is also a passionate educator who instructs on EMST courses and runs workshops at clinical conferences, on issues of communication, incident investigation and clinical error. His current work is exploring how process redesign and the intelligent application of technology can develop safer, more efficient healthcare systems.

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