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Overcoming Patient Communication Challenges

Use this toolbox to help overcome specific patient communication challenges. See our resource, <u>Telemedicine/Telepharmacy: Tips for Connecting With Patients</u>, for tips when communicating via telehealth methods (e.g., video calls, telephone calls). See our CE, <u>I Hear You Now: How to Communicate With Patients</u>, for an overview of high-performance communication and tips for nonverbal communication.

Goal	Suggested Strategies or Resources
Communicate	• Use these tips to facilitate effective communication with patients who are hard of hearing or deaf:1
effectively with	 Minimize background noise and visual distractions.
patients who are	o Communicate in a well-lit area. Have the light source in front of the person speaking, not behind.
deaf or hard of hearing.	 Maintain eye contact and make sure the patient can see your mouth (e.g., if masks are used, try to use a clear one). There are links on the National Association of the Deaf website for places to purchase clear masks (https://www.nad.org/best-practices-for-wearing-masks-when-communicating-with-dhh/) Avoid oversimplifying, abbreviating, or diluting information. Hearing status is not related to intelligence level. Speak clearly, using a normal tone, at a moderate pace, and do NOT exaggerate words. Exaggeration distorts the mouth and can make lipreading difficult. Use diagrams, models, illustrations, written materials, and other visual aids. Use the teach-back method to make sure patients understand. Try to rephrase rather than repeat the same words if patients do not understand.
Use tools to communicate with patients who are deaf or hard of hearing.	 Use available communication aids and interpreting service options (https://www.hearingloss.org/wp-content/uploads/HLAA_HC_Providers_Aids-Services.pdf).² Become familiar with teletypewriter (TTY) and internet protocol (IP) relay services. You can access TTY by dialing 7-1-1 on the telephone. U.S.: https://www.fcc.gov/consumers/guides/711-telecommunications-relay-service (TTY) and https://www.fcc.gov/consumers/guides/ip-relay-service# (IP) Canada: https://crtc.gc.ca/eng/phone/acces/mrsrt.htm (TTY and IP) Patient communication aids can include communication access realtime translation (CART), amplified microphones (e.g., pocket talker), captioned phones, speech-to-text apps (e.g., AVA Accessibility [https://www.ava.me/], Live Transcribe [available for Android and Apple products]), etc. Interpreting services can include sign language or oral, tactile, or remote video interpreting, etc. There are several available online options to learn American Sign Language (ASL). Examples include HandSpeak (https://www.handspeak.com/word/) and LifePrint (http://www.lifeprint.com/). Here are links to locate sign language interpreting services (https://www.miusa.org/resource/tipsheet/locatingASLinterpretersinUS# [U.S], https://www.chs.ca/service/chsinterpreting-services [Canada]).

Goal	Suggested Strategies or Resources
Communicate effectively with patients who are blind or visually impaired.	 Use these tips to facilitate effective communication with patients who are blind or visually impaired:^{3,4} Introduce yourself, so the patient is aware of your presence and understands your role. Verbally identify other people who may be present and interacting with the patient. Use a normal tone, volume, and vocabulary. It's not necessary to avoid words like "see," "watch," or "look." Be specific and clear when giving instructions. Remember that patients may not be able to see how you are gesturing or what you are referring to. Use the teach-back method to make sure patients understand. If the patient has a guide animal, keep your attention on the patient. Take care not to distract or pet the animal unless the patient gives you permission to do so.
Recommend tools to help patients who are blind or visually impaired.	 Use large font on prescription labels or written information. In addition, there are companies that create: audio labels which allow patients to hear the words typed on a prescription label (e.g., ScripTalk). braille labels which allow patients to read prescription labels through touch (e.g., ScriptAbility Braille) Encourage use of tools or resources to help patients use their medications appropriately. For example: talking devices (e.g., glucose monitor, thermometer, blood pressure monitor, pill organizers). magnifying devices (e.g., insulin syringe magnifier) apps to read text aloud (e.g., KNFB Reader) Look for other resources and tools for the blind and visually impaired: U.S.: The American Council for the Blind (https://www.acb.org/diabetic-resources). Canada: Canadian National Institute for the Blind (https://cnibsmartlife.ca/).
Communicate effectively with patients despite language differences.	 When possible, use an interpreter. It may take more time, but it can help to avoid errors or inappropriate med use. Use Language Identification cards (e.g., https://health.maryland.gov/OEOP/SiteAssets/Pages/Interpretation-and-Translation-Services/LanguageLine%20-%20Brochure%20of%20All%20Languages%20Available.pdf) if you are not sure what language patients speak. As a healthcare professional, you do not need informed consent before disclosing health info through interpreters.⁵ Interpreters can provide services face-to-face, over the phone, or by video. Some options include: Language Line: https://www.languageline.com/ American Translators Association: https://web.atanet.org/directory/individuals.php Canadian Translators: http://www.cttic.org/chercher.asp When using an interpreter speak directly to the patient, not the interpreter.⁶ This shows that you are giving the patient your full attention. pause occasionally and to speak in "chunks" so that the interpreter has time to speak. When using an interpreter is not possible, use: hand gestures to supplement or replace words

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Language differences, continued	 visual aids. For example, communication visual aids can be found online (e.g., WigitHealth [https://widgithealth.com/downloads/index.htm#communication-boards], Eastern Health [https://www.easternhealth.org.au/services/language-services/cue-cards/cue-cards-in-community-languages]). See our CE, Addressing the Needs of Spanish-Speaking Patients, for Spanish words for commonly used healthcare related words (e.g., body parts, numbers, common symptoms). Use the teach-back method to make sure patients understand.
Use tools when communicating with patients who speak a different language.	 Use resources to help supplement communication with patients who speak a different language. For example: The United States Pharmacopeial (USP) Convention has downloadable graphic images to help with medication instructions, precautions, and warnings at https://www.usp.org/health-quality-safety/usp-pictograms. Agency for Healthcare Research and Quality (AHRQ) has a list of standard and simple med instructions. Instructions are available in Chinese, Korean, Russian, Spanish, and Vietnamese at https://www.ahrq.gov/health-literacy/improve/pharmacy/instructions.html.
Communicate effectively with angry or difficult patients.	 Don't take things personally and keep your cool. The further you can distance yourself from feeling like you are on the receiving end of the anger, the better equipped you will be emotionally to handle these situations. 8,10 Be respectful. This does not mean that you have to like the bad behavior displayed by angry patients or even put up with it, but it does mean that you yourself should not be disrespectful. 8 Be aware of your body language. Some body language may indicate you are angry (e.g., crossing your arms, standing with your hands on your hips, clenching your jaw). 10 Display empathy. Even if you don't necessarily understand why the patient is angry, simply verbally acknowledging that you notice they are upset can help open the dialogue further and potentially even diffuse the situation. 8,10 Set boundaries. For example, let the angry patient know that you want to help them, but that you will not accept yelling, disrespect, or profanity. 9 Try to end on a positive note. Most angry patients will eventually settle down. 10
Watch for signs that patients may have difficulty reading.	 Things to look for that might suggest that a patient is having difficulty reading:⁷ It takes a long time for patients to fill out a form or they may have someone fill it out for them. Patients may: be very quiet when a healthcare worker goes over information. say they will read over written information when they get home. blame difficulty reading on poor lighting or leaving their glasses at home

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Use effective verbal communication regardless of health literacy.	 Give the most important information first.¹¹ When possible, limit to just a few important points (e.g., three or four main ideas). Providing too much information at one time can be confusing and make it hard for patients to remember the important points.¹¹ Avoid scientific words or technical jargon. For example, say "birth control" instead of "contraception" or "high blood sugar" instead of "diabetes."¹¹
Provide effective written communication regardless of health literacy.	 The CDC has a guide for creating easy to understand materials at https://www.cdc.gov/healthliteracy/pdf/simply_put.pdf. The U.S. National Library of Medicine has free, printable, easy to read patient education resources on a variety of topics at https://medlineplus.gov/all_easytoread.html. Some topics have both English and Spanish versions available. Provide written communication at or below the fifth-grade reading level.¹² Check the reading level of documents that you create. Some software may offer this tool within the program (e.g., Microsoft Word). Online tools are also available (e.g., readability checker [https://www.prepostseo.com/readability-checker]).
Communicate effectively with older patients.	 Minimize distractions Encourage older patients to ask questions. Rushing or appearing uninterested may lead to misunderstandings or errors. Address older patients directly, even if a caregiver is with them. Follow patient cues about how much to involve the caregiver. Use the patient's name (e.g., Mr. Jones, Mrs. Thomas), instead of "elderspeak" (e.g., honey, sweetie, cutie). Avoid calling patients "elderly" or "senior citizens" or saying they "still" drive or live on their own. These can be offensive. Maintain eye contact and keep your face visible when speaking. Stay alert for older patients with hearing and/or vision problems. See the rows above specific to these situations. Focus on key points when providing education, too many details may cause confusion. Write down the main points for patients to take home. Use the teach-back method to make sure patients understand. Don't assume that older patients prefer phone calls. Some may prefer to get information through texts, emails, or smartphone apps.

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Communicate effectively with culturally diverse patients.	 Tips to improve cultural competence can be found at The American Psychological Association (https://www.apa.org/gradpsych/2010/09/culturally-competent). Canadian Nurses Association (https://www.mycna.ca/~/media/nurseone/page-content/pdf-en/cultural_competence_guide_for_primary_health_care_professionals.pdf) See our CE, Embracing Cultural Competence and Improving Cultural Communications, for tips on self-awareness and identifying patient-specific cultural considerations. Use our CE, Cultural Competence: LGBTQ Patients, and our Checklist: Caring for Transgender Patients, to become familiar with sex, gender identity, and sexual orientation terminology and others tips to improve communication and care. See our CE, Addressing the Needs of Spanish-Speaking Patients, to improve your cultural competence regarding Spanish-speaking patients.

Users of this resource are cautioned to use their own professional judgment and consult any other necessary or appropriate sources prior to making clinical judgments based on the content of this document. Our editors have researched the information with input from experts, government agencies, and national organizations. Information and internet links in this article were current as of the date of publication.

References

- Hearing Loss Associates of America. Communicating with hard of hearing and deaf patients. https://www.hearingloss.org/wpcontent/uploads/HLAA_HC_Providers_Communicati ng-with-Patients.pdf. (Accessed April 8, 2021).
- Hearing Loss Associates of America. Communications aids and services. https://www.hearingloss.org/wpcontent/uploads/HLAA_HC_Providers_Aids-Services.pdf. (Accessed April 8, 2021).
- 3. Stevens S. Assisting the blind and visually impaired: guidelines for eye health workers and other helpers. *Community Eye Health* 2003;16:7-9.
- 4. Australian Government Department of Families, Housing, Community Services and Indigenous Affairs. Communicating with people who are blind or have vision impairment factsheet. January 20, 2009. http://resources.fahcsia.gov.au/ConsumerTrainingSupportProducts/employers/blind_vision.htm. (Accessed April 8, 2021).
- Smith AK, Sudore RL, Perez-Stable EJ. Palliative care for Latino patients and their families: whenever we prayed, she wept. *JAMA* 2009;301:1047-57.

- Breen LM. What should I do if my patient does not speak English? September 1, 1999. https://jamanetwork.com/journals/jama/fullarticle/184 2842. (Accessed April 8, 2021).
- 7. Andrus MR, Roth MT. Health literacy: a review. *Pharmacotherapy* 2002;22:282-302.
- 8. Healthcare Providers Service Organization. Handling the angry patient. https://www.hpso.com/risk-education/individuals/articles/Handling-the-Angry-Patient. (Accessed April 8, 2021).
- Evidence in Motion. Difficult patients? Set boundaries. August 24, 2018. https://evidenceinmotion.com/difficult-patients-set-boundaries/. (Accessed April 8, 2021).
- Gray R. 7 tips for handling an angry patient. June 17, 2016. https://www.hcplive.com/view/7-tips-for-handling-an-angry-patient. (Accessed April 8, 2021).
- CDC. Simply put: a guide for creating easy-tounderstand materials. https://www.cdc.gov/healthliteracy/pdf/simply_put.pdf. (Accessed April 8, 2021).
- Stossel LM, Segar N, Gliatto P, et al. Readability of patient education materials available at the point of care. J Gen Intern Med 2012;27:1165-70.

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