Everything Speaks

Quoted from the Disney Institute: "Everything speaks." From the moment a patient/client first engages with the practitioner or representatives of the practitioner (e.g. inquiring about services, email, phone call) or enters into the practitioner's domain (e.g. clinic, gym, studio, office, mobile-office), everything speaks and every engagement is an opportunity for the health professional/staff to create a strong impression and make a positive impact. "Make every contact count" (Percival, 2014, p. 37) was an underlying theme in the National Health Service (NHS) Future Forum 2012. Percival (2014) noted that the Royal College of Nursing (RCN) viewed patient interaction on every level (front desk, staff, administration, health care workers) as an opportunity to positively impact health and wellness.

The Royal College of Nursing workshop titled "Making Every Contact Count" incorporated behavioral and communication strategies such as Prochaska and DiClemente's Transtheoretical Model (TTM) and Miller and Rollnick's Motivational Interviewing (MI) to address patient communication challenges expressed by nurses. Both TTM and MI principles foster more meaningful robust communication and empower the patient towards self-efficacy and long-lasting positive changes. Percival (2014) noted that it has been shown in over 200 randomized controlled trials that using motivational interviewing techniques not only guided the patient towards positive behavioral change but also improved communication and the relationship between the patient and healthcare provider.

Motivational interviewing techniques in coaching and fitness/health counseling may be used to guide the client to self-realization and decision-making. There is no formula and this method is highly individualized. Percival (2014) noted that motivational interviewing techniques were patient-centric and required active engagement by the patient. However, utilizing the transtheoretical model and motivational interviewing techniques required that the practitioner be a good, reflective listener. The practitioner would benefit not only from developing communication skills but also developing listening skills.

Percival (2014) summarized the key points in the RCN Making Every Contact Count workshop: how a person communicates (e.g. body language and tone) is as important as the content of the message; active and reflective listening skills are as important in communication; ultimately the client/patient is responsible for the choices and decisions they make but the role of healthcare is to guide them to make the best possible decisions regarding their own health. Percival (2014) noted practicing of skills included asking open-ended questions; learning how to restate (put in one's own words what the patient has communicated) and clarify communication; and learning to listen effectively without overtly directing the client/patient to a specific practitioner-objective.

Percival (2014) also reported that the participants' responses via email evaluation indicated that the communication and listening skills taught in the workshop enabled them to engage in more meaningful communication with the clients/patients especially over difficult topics. The workshop participants indicated in the survey that they felt better equipped (Percival, 2014).

Everyone the client/patient is in contact with has an opportunity to add to the experience, because while the client/patient may not remember exactly what the practitioner says or while the client/patient may not fully understand the practitioner or staff (e.g. non-English speaking), the client/patient will remember the experience (e.g. body language, tone of voice, eye contact, smiles, kind words, politeness, respect). Everything speaks and communication begins before any words are spoken.

References

Percival, J. (2014). Promoting health: making every contact count. *Nursing Standard*, 28(29), 37-41.