

On the Importance of Communication Excellence in the Clinical Domain

Good communication between clinicians and patients help build trust, patient confidence, promotes compliance to the patient's treatment program, and lends to an overall positive healthcare experience and increased satisfaction. Good communication is even more challenging and complex with pediatric cases as it requires the clinician to have strong and effective communication skills in order to navigate and mediate between the minor and the parent/guardian. The Accreditation Council for Graduate Medical Education (ACGME) and the Academic Pediatric Association require residency programs to incorporate communication skills classes into the curriculum (Rider, Volkan, & Hafler, 2008). These communication programs incorporate evidence-based communication models such as Kalamazoo consensus Statement framework, The Four Habits Model, The Calgary-Cambridge Guides, the 5-Step Patient-Centered Interviewing Model, and the Patient-Centered Clinical Method (Rider et al., 2008).

In Rider's et al. (2008) study, residents were surveyed regarding their outlook on communication skills in pediatrics and their confidence in their abilities. The four most important aspects of communication to the pediatric residents were: showing appropriate empathy and care with the patients, communicating effectively with the patients, communicating bad news about the patient's condition to the patient and family, and communicating with the parents/guardians (Rider et al., 2008). Other skills rated as important are: interviewing adolescents, listening skills, building rapport, and cultural awareness and sensitivity (Rider et al., 2008). The pediatric residents surveyed indicated that the most difficult communication situations were: discussing end-of-life issues with the pediatric patient and family/guardians, delivering bad news or explaining serious conditions to children and the family, dealing with the difficult parent/guardian, cultural awareness, and understanding the patient's perspective (Rider et al., 2008). Approximately less than half of the pediatric residents surveyed were confident of their skills in these more advanced patient-parent-clinician scenarios. Rider's et al. (2008) study noted that more communication skills programs need to be integrated into the residents' curriculum and that residents need more on-the-job training and support in order to practice their communication skills effectively and develop situational confidence.

Parents/guardians need to feel respected and that the clinician is genuine in their attentiveness to their child's feelings and medical condition. The study of email communication between clinicians and parents/guardians by Schiller, Christner, Stansfield, Watnick, and Mullan (2013) noted that parents/guardians were most concerned with building a relationship with the healthcare provider, clarity of communication, and clear expectations. From the parents/guardians perspective, key qualities of effective communication included: respect, compassion, and genuine empathy without patronizing undertones (Christner et al., 2013). Lack of good email writing skills and grammar mistakes in emails were offensive to the parents/guardians and undermined the respect for clinicians and the clinicians' competencies (Christner et al., 2013).

Excellent communication skills are vital in pediatric scenarios. The dynamics between the minor, parent/guardian, and the clinician and healthcare staff can be delicate. Communication skills programs and education for the clinician need to specially address the pediatric scenario.

References

Rider, E. A., Volkan, K., & Hafler, J. P. (2008). Pediatric residents' perceptions of communication competencies: Implications for teaching. *Medical Teacher*, *30*(7), 208-217.

Schiller, J., Christner, J., Stansfield, R., Watnick, C., & Mullan, P. (2013). What parents want from emails with their pediatrician: Implications for teaching communication skills. *Patient Education & Counseling*, *92*(1), 61-66.