



COMMUNICATION - A FORGOTTEN SKILL

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ABSTRACT

Communication, a skill, is an important component of decision making in the treatment of pediatric patients. An effective, skilful and compassionate communication is an essential skill for the paediatrician. This article throws some light on the communication skills and how to develop them.

Keywords: Communication; Treating physician.

INTRODUCTION:

Communication, with regard to health care, is being very promptly recognised now a day as being overlooked in our daily practice¹. It is a skill that needs to be taught and learned. Increasing problems are being now a day recognised with regards to gap in communication, giving attention to the wishes of the parents and support for families and patients². The role of the treating physician is not only confined to the administration of the routine medical treatment but extends to the communication of prognosis, indications of various procedures and treatments, taking permission of autopsy and organ donation in case of demise of the patient³.

The interaction quality of the healthcare providing team with the family members improves the parental perception about the care being delivered to their babies and compliance to the treatment, and also on the other hand improves their own health care delivery system and self management³. A tactful, thoughtful and sympathetic counselling at the times of distress and pain will help the families to cope up with difficult situations⁴. Lifelong anger and regret for the families and unnecessary legal issues are the results of bad communication skills⁵. Parents perceive poorly delivered information as lack of interest and empathy and this adds to their anger and grief⁶.

PROBLEMS AND ISSUES:

Parents are in a state of confusion and dilemma and are unsure of their roles when their child is sick which can be expressed as helplessness, inadequacy, anger or guilt, loss of control in decision making. These can be easily handled by the healthcare providing team by listening to them and providing them control as much as possible in the decision making and giving them roles in physical aspects of care⁷.

Honesty is needed in telling about the exact condition of the child especially if the child is critical. It should be understood by the parents that the condition of a child is a dynamic process and it keeps on changing. In case the child's death is imminent, accurate and truthful information needs to be given⁷.

Parental separation from their child is often the greatest in the initial hours after the child becomes critically ill as the child might be transferred to ICU, operation theatre etc which are not accessible to the parents easily. This separation anxiety needs to be minimised by prior notification of the plans to move their child⁷.

Often the physical appearance of the child changes during illness or administration of treatment modalities (swellings, drains, catheters etc.). Discussion and support from the healthcare delivery staff is needed at this crucial situation and their anxiety and fear can be minimised to some extent by letting them maintain contact with their sick child⁷.

It must be understood by the healthcare delivery staff that they are not the only one to make all the decisions regarding the care of the child and the parents also have a role in the same. It is important to give frequent accurate and truthful information to the parents to gain their faith in hospital staff. It is also important to make them understand the child's condition, prognosis, pros and cons of the treatment in their language which they easily understand and to answer their queries and concerns very patiently⁷.

Breaking a bad news to the parents often leads to grief, anger, remorse, anxiety or frustration in them. Certain points are to be kept in mind and exercised in such situation. Social workers are often of help in such difficult situations. It is important to use simple and easily understandable language and if need arises a translator's help should be taken. Firstly it should be conveyed to them that you are sorry for that bad news and that you respect and care for them. Care should be taken that these informations are not conveyed telephonically. It is preferable to tell such news when the parents and the family members are together. Sometimes the parents tend to blame themselves for such a bad condition of the child, in such situations they should be counselled that it's not so and they should be emotionally supported then. They should be given chance to clear their doubts and should clearly



be explained about the follow up schedule. Use of copy and pen in these conditions in explaining is not a bad idea⁸.

SUGGESTIONS FOR COMMUNICATION:

Communication is an art and hence needs to be learned. It is preferable to make a list of the things which you want to say to the family, so that some important thing is not missed. Main issues need to be highlighted and it is advisable not to make repetitions. The treating physician should introduce herself/himself and make the parents aware of his/her role in the care and treatment of the child. Time should be given to the parents to accept the bad news as this can shake up the family. Encouragement should be given to the parents to clarify their wrong informations and misunderstandings. On stabilisation of the child, the parents should be allowed to see their child as it provides the insight on their child's condition.

A real challenge is the disclosure of the news of a child's demise to the family⁹. The family should be talked in a private room and care and compassion needs to be shown at every step. Do not ask the family members to rush from the child as they might like to remain with the body for sometime¹⁰.

One important issue to be conveyed to the parents is that their grief can be turned into the gift of life for other families in need by organ donation. It is really a difficult task for the treating physician to discuss about the event of a child dying and organ donation, but as it is the need of the hour, it needs to be explained to the family members that many and many children are dying in the need of an organ and they can be a part in this noble act.

SUMMARY:

Needless to say, the long forgotten skill-communication needs to be incorporated in our practice. Skilful, effective and compassionate communication needs to be incorporated in the physicians as it can improve the outcomes for the patients, their families and the treating team.

Physicians need to learn to support, respect and work with the families of the children.

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