Nurse-Patient Communication, Interdisciplinary Communication and Patient Safety

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Patient-clinician communication is really important and it was noted that the patients are becoming more uncomfortable while sharing information therefore the clinicians were also unable to provide the treatment effectively so in order to develop a relationship of trust and respect the public health policymakers made a team of patients and healthcare providers to design some principles so that a relationship will be formed between the nurses and patient and then it will be easy to deliver the treatment.

There are seven basic principles of patient-clinician's communications. All the seven components are important in designing effective healthcare facility for the patients. These principals are

* Mutual respect
* Harmonised goals
* A supportive environment
* Appropriate decision partners
* The right information
* Full disclosure and transparency
* Continuous learning

These seven principles help identify the mutual expectations of both patients and their clinicians. Each of the seven principles can help the physicians to interact with their physicians effectively. In the case of mutual respect, both clinician and the patient are engaged with each other as decision making partner. Communication, in this case, should seek to improve healthcare decision making by exchanging information and also by supporting the improvement of a partnership relationship (Paget et al., 2011). Which is based on trust and mutual respect. Harmonized goals mean the understanding and agreement of the proposed care plan. In this case, the factors should include health and other economic preferences. It should also include language and other ethnic differences. Supporting environment means a secure and nurturing environment where the patient will feel safe. Decision partners are deciding fully understanding the patient option so that the patient will feel positive about the treatment is given. The clinician should share the right information about the patient's health including his disease and any symptoms if present. Transparency means that the patient should be open to the clinician on all the relevant circumstances and medical history. By understanding the patient condition, reliable care can be given to him. Continuous learning means the establishment of an effective approach for constant feedback on the progress.

The three methods that are used to improve the interdisciplinary communication are multidisciplinary rounds using goal sheet, team huddles and also a standardised communication format that is called SBAR or situation, background, assessment, and recommendation. Among all the three methods SBAR Is useful in eliminating the communication gaps, which is used to estimate the patient's current situation. If there are any major complaint in the medical condition of the patient, they are estimated. The patient's medical background is found out, the patient's current diagnosis is assessed and lastly, a recommendation is made about how the patient will be treated.

 Among all the three methods the SBAR method is the most useful, and it can be used rapidly in healthcare for improving the communication gap. Because in this method all the information that is important for the development of successful treatment is taken out and by looking at all that information the patient can be treated accordingly (Gollust & Dwyer, 2013). Normally patients face different medical issues; it is not necessary that the issue can be the only physical; it can be an emotional and psychological issue. In that case the nurses and other healthcare providers should make sure that the information is not leaked and the trust should not be breached and in case if the information is related to any sensitive issue like sexual abusive then at that time the patient should be taken in confidence and steps should be taken for the best interest of the patient. Ethical is an important and sensitive issue in healthcare because patients put their trust in the practitioners and it is on the practitioners that how they safeguard that information. Because for a successful communication trust is the basic and it should make sure that it is not broken in any case (Wang, Wan, Lin, Zhou, & Shang, 2018).

 The health plans, purchasers and other parties who have an influence on patient-clinician health must not interfere with the foundation of that relation which is a bond of dignity and trust of the patient. The thirds party’s role here is very important because they help in developing an ethical environment where the needs of the patients are respected. For example, an ethical environment promotes the interaction of clinician with the patient regarding all the available treatment options. Patients must be confident that whatever they are sharing with the clinician remain between the two even if the information needs to be disclosed then the patient will be taken into confidence. Along with that, the clinicians must maintain truthful records in which all the facts regarding the patient's health must be stated correctly. If all the ethical issues are kept in mind while handling any patient, then the delivery of healthcare facility will be more effective because of the confidence and trust between the patient and clinician (Povar et al., 2015).

 The healthcare department is significantly designed to provide efficient facilities for the patient. For the delivery of an efficient facility, it is important that the communication between the patient and healthcare provider is strong. Most of the patients are hesitant while sharing any personal information with the healthcare provider because they are scared that their information will be leaked without their consent and at that time the treatment also turns out to be ineffective so to avoid that the public health policymakers have designed these principles so that a relationship of trust is built between them and without any hesitation the patient will share everything.

**References**

Gollust, S. E., & Dwyer, A. M. (2013). Ethics of Clinician Communication in a Changing Communication Landscape: Guidance From Professional Societies. *JNCI Monographs*, *2013*(47), 147–152.

Paget, L., Han, P., Nedza, S., Kurtz, P., Racine, E., Russell, S., … Von Kohorn, I. (2011). Patient-Clinician Communication: Basic Principles and Expectations. *NAM Perspectives*, *1*(6).

Povar, G. J., Blumen, H., Daniel, J., Daub, S., Evans, L., Holm, R. P., … and the Medicine as a Profession Managed Care Ethics Working Group\*. (2004). Ethics in Practice: Managed Care and the Changing Health Care Environment: Medicine as a Profession Managed Care Ethics Working Group Statement. *Annals of Internal Medicine*, *141*(2), 131.

Wang, Y.-Y., Wan, Q.-Q., Lin, F., Zhou, W.-J., & Shang, S.-M. (2018). Interventions to improve communication between nurses and physicians in the intensive care unit: An integrative literature review. *International Journal of Nursing Sciences*, *5*(1), 81–88.