# Great Explanations

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Good Medical Practice

- Patients must be fully informed about their care.
   When discussing care options with patients, you must discuss the risks as well as the benefits of the options.
- You or an appropriate person must give the patient **clear, accurate information** about the risks of the proposed treatment or care, and the risks of any reasonable alternative options, and **check that the patient understands**.
- You should **discuss risks** that occur often, those that are serious even if very unlikely, and those that the patient is likely to think are important.

RESPECT model

• See th	ect on a social level ne patient's point of view iously suspend judgment
	nize and avoid making assumptions
• Empothy	emember the patient has come to you for help Inderstand the patient's rationale for their behaviours & illness 'erbally acknowledge and legitimize the patient's feelings
	about and understand the barriers to care, and overcome ssure the patient you will be available to help
• Partnership	Be flexible Negotiate roles when necessary
•Explanations	<ul><li>Check often for understanding</li><li>Use verbal clarification techniques</li></ul>
<ul> <li>Cultural Competence</li> <li>Understand that the patient's views of you may be defined by ethnic &amp; cultural stereotypes (and vice versa)</li> <li>Know your limitations in addressing health issues across cultur</li> <li>Understand your personal style and recognize when it may not be working with a given patient</li> </ul>	
	cognize that self-disclosure may be difficult for some tients; Consciously work to establish trust

# Teach-Back Method

- **Explain** the concept to the patient, avoiding medical jargon.
- Assess the patients' understanding by asking them to explain the concept in their own words.
- Clarify anything my patients did not understand and reassess their understanding.
- If the patient still does not understand, find a new way to explain the concept.
- Repeat the process of explaining and assessing for understanding until the patient can accurately state their understanding.

Steps to good explanations

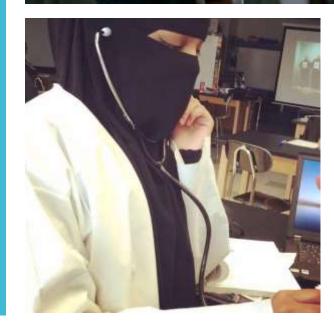
- 1. Be attentive
- 2. Ask open questions
- 3. Be curious
- 4. Summarise throughout
- 5. Involve friends and family
- 6. Use the right tone
- 7. Be aware of your patient's situation
- 8. Get help from colleagues

- 9. Be aware of bias
- 10. Communicate in different ways
- 11. Adopt shared decision making
- 12. Try active listening
- 13. Watch yourself back
- 14. Speak up
- 15. Keep records
- 16. Share your notes with patients

## Cultural Competence











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# Time

- 12 minute SCA cases
- 10-15 minute clinic slots
- Multi-problem consults



S	Situation: I am (name), (X) nurse on ward (X) I am calling about (patient X). I am calling because I am concerned that (eg blood pressure is low/high, pulse is XX, temperature is XX, Early Warning Score is XX)
B	Background: Patient (X) was admitted on (XX date) with (eg MI/chest infection) They have had (X operation/procedure/investigation) Patient (X)'s condition has changed in the last (XX mins) Their last set of observations were (XX) Patient (X)'s normal condition is (eg alert/drowsy/confused, pain free)
A	Assessment: I think the problem is (XXX) And I have (eg given O <sub>2</sub> /analgesia, stopped the infusion) OR I am not sure what the problem is but patient (X) is deteriorating OR I don't know what is wrong but I am worried
R	Recommendation: I need you to Come to see the patient in the next (XX mins) AND Is there anything I need to do in the meantime? (eg stop the fluid/repeat the observations)

Building Blocks Method

can see what you think or feel?' • 'Have you heard of anything about x?.' • 'Do you already know about x?' Starting • 'What do you already know?' Point • Weaving: include what they have told you so far into your explanation as much as possible. • Flexibility: keep checking what the patient already knows so that you can then Building continue to build on that • **Explain** to level patient wants; use patient's own words; "chunk 'n' check"; repetition; summarising Help to • Use visual media and leaflets if they help Remember

• Signpost that you're going onto the explanation and state your diagnosis briefly.

• 'Is it okay if I take a moment to explain what I think may be going on and then we

# 5 Levels



- Wired 5 Levels series
  - Neuroscientist explains the Connectome
    - https://youtu.be/opqla5Jiwuw?si=Tr3TY9yTe\_YNVVsH
  - Biologist explains CRISPR
    - <u>https://youtu.be/sweN8d4\_MUg?si=gpi3F1eJPdBOiEvO</u>
  - Sleep scientist explains sleep
    - https://youtu.be/OB61yG8WDyU?si=7rF75rG7uInHe8gJ

# **Explanation Practice**

Case Scenarios

### Explanation Practice



#### Assume:

- ID checked, history taken, examination done & diagnosis confirmed
- No hidden ICE the patient wants/needs an explanation alone

### Explair

• Defined issue/treatment – no need to consider other aspects

### Patients

• Be agreeable, lenient and compliant; the goal is to agree on good explanations, not act out realistic patients.

### Observers

- Good phrases
- Practice alternate methods