

Communication skills for staff wearing Personal Protective Equipment (PPE)



The global COVID-19 pandemic has affected how both patients and clinicians experience face-to-face consultations. Patients are fearful that they may be seriously ill or become seriously ill as a result of the virus and clinicians are fearful that they may be infected with the virus by their patients. These fears are increased by the need for clinicians to wear PPE which can make them appear intimidating and disguises their non-verbal communication. In these circumstances, core communication skills, particularly those required to establish and maintain a supportive therapeutic relationship are particularly important. And these skills need to be adapted to circumstances where opportunities to use touch for example, are limited or prohibited. **Remember it is both what we say and how we say it that will be remembered.**

Making conversations easier



“ It’s very daunting for patients. All they see from when they come through the doors are people coming to them wearing PPE. They already feel vulnerable and afraid, and PPE takes away the humanity.

Impact on patients

PPE can heighten patients’ fears of isolation and patients being cared for by healthcare staff in PPE can feel vulnerable and afraid. If you haven’t previously met the patient, PPE can also pose a significant challenge to building rapport. The quality of patient experience with staff wearing PPE can be affected by:

- the inability to engage in usual nonverbal social behaviours, such as handshakes/fist bumps, leaning in, and facial cues.
- the sense of disconnect and distraction created by the PPE and difficulty hearing what the patient or clinician is saying due to reduced speech clarity. This, combined with the loss of lip reading and visual cues, can make communication between staff and patients extremely difficult.

These barriers compound the existing obstacles to interpersonal interactions, such as cultural and language differences between patients and staff. Despite some barriers, demonstrating empathy is possible while wearing PPE.

Communication skills

Communication is at the heart of everything we do. It’s central to our relationships, our work and our leisure interests. But it’s particularly important in healthcare, where patients can feel vulnerable, alone and frightened. Research suggests that demonstrating empathy and understanding of a patient’s ideas and concerns enhances the patient experience. It may also lead to better clinical outcomes, due to increased patient adherence to providers’ recommended treatment plans.

The protective gear renders communication between staff, and between staff and the patient, more difficult. *“It’s really difficult to hear each other”* so what can healthcare staff do to address this?

Calgary-Cambridge Guide

Communication skills

We don't intend to tell you exactly what to say, instead we are highlighting certain skills and providing a series of useful phrases under the relevant sections of the Calgary-Cambridge Framework.

Providing structure

- Making organisation overt
- Attending to flow

Initiating the session

- Preparation
- Establishing initial rapport
- Identifying the reasons for the consultation

Gathering information

- Explore the patient's problems
- Understanding the patient's perspective

Physical examination

Providing information & planning

- Provide correct amount and type of information
- Aid patient recall and understanding
- Incorporate the patient's perspective
- Shared decision making and planning

Closing the session

- Ensuring appropriate point of closure
- Forward planning

Building the relationship

- Greeting and introductions
- Non-verbal behaviour
- Involve the patient and share your thinking
- Empathy

Adapted From: Silverman, J., Kurtz, S., & Draper, J. Skills for Communicating with Patients (3rd ed). Oxford: Radcliffe Publishing (2013).

Initiating the session

Preparation

Prepare yourself

It can be hot and uncomfortable to wear full PPE. Be aware of how you are feeling. Take regular breaks as necessary.

Prepare the environment

Try to minimise background noise or move to a quiet area if possible.

Building the Relationship

Greeting & Introductions

- Ensure that your **name badge** is visible and easy to read.
- **Identification boards** can be useful for staff whose face is covered by personal protective equipment (PPE), for example, photographs of its staff on a board in the wards to help patients identify with the person behind the mask. So, when staff introduce themselves, they point to the board and say: *“This is me, this is who you are talking to and I’m looking after you today”*.
- Wear a **clear photograph** of your smiling face.

Non-verbal behaviour

- PPE face masks reduce speech clarity and combined with the loss of lip reading and visual cues make communication between staff and patients more difficult. If it is possible, use a plastic ‘see-through’ visor. Face the patient and make sure they are looking at you before communicating.
- Look directly at the patient and make good eye contact.
- Lighting on the healthcare workers face is important. Try not to stand with a light or window behind you and don’t cover your mouth or face with your hand.
- Be responsive in the conversation. Support understanding by intentionally using gestures and body language to communicate information.
- Even though the patient may not be able to directly see your face and some of your gestures bear in mind that your non-verbal communication will be transmitted to some degree and will be picked up by the patient. Also, allow the patient a little more time to pick up on your non-verbal communication as it is disguised by the PPE.

Touch

- Where touch is appropriate, it is okay to use this to comfort patients while wearing PPE.

Positioning

- Do not speak to the patient while you are moving about.

Involving the patient

Devices

- If the patient uses a hearing aid or listening device ensure that they are available and in use.
- Acknowledge the impact that PPE/not shaking hands/distance has on the communication... *"Now I know I appear a bit intimidating dressed in all this gear but I do really want to understand what's being going on for you and how you feel about it all"*.

Gathering information

Explore the patient's problems

- The most important thing you can do is to listen carefully to questions and concerns.
- Summarise your understanding of the patient's problem – this demonstrates you have understood the patient fully, despite the barriers of PPE.
- Name the emotion and use verbal empathy since it can be difficult to express empathy non-verbally while wearing PPE.
- Ask clear, open-ended questions to elicit a list of needs up front.

Understand the patients perspective

- Explore ideas, concerns, and expectations from the patient's perspective.

Providing information & planning

Provide correct amount and type of information

- **Slow down.** Provide information in small chunks – the additional stress of the consultation means the patient needs more time to process the information you are providing. We normally learn a lot from patients facial expressions, and if the patient is wearing a mask, it can be difficult to gauge their degree of concern or bafflement when you cannot see the bottom half of their face.
- Encourage questions and keep checking understanding "*please stop me if...*". This allows the patient to let you know if they can't understand what you are saying because of the PPE.

Aid patient recall and understanding

- Speak clearly and at a slightly slower pace, but don't shout or overenunciate mouth movements. Keep your head fairly still.
- The patient may want to communicate by note-writing, this will take a little longer, please be patient and if necessary, respond by writing.
- Be prepared to repeat and rephrase information if necessary. Ask questions to check understanding.
- Invite the patient or colleague to summarise their understanding of the information and/or plan.
- You may not have an answer for every question: a lot is still unknown about COVID-19 and it is okay to admit that.

Visual aids

- If available, share information pamphlets or hand-outs with your patients.
- Refer to visual information (drawings, diagrams or photographs) during conversations.
- Another solution is for staff to use a whiteboard on which to write messages.

Closing the session

Ensuring appropriate point of closure

- Be sure to finish the consultation with a **clear** plan of how the patient is going to continue to receive on-going support. Check for understanding of the plan and any agreed next steps.

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