

# Communication: At the Heart of Compassionate Care

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*An excerpt from the book "The Healing Art of Communication," a new resource for front-line health care staff by Burl Stamp, Founder & President, Stamp & Chase, Inc.*

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It became a daily ritual. My mother would arrive early at the hospital where my father lay dying. Although we all knew intellectually that his illness was terminal, we didn't think about it – and we certainly didn't talk about it – in that way. Our view of the future was incrementally being reduced to measurement in weeks, then days. And, on some days, even hours.

What would today bring? We were, of course, concerned about my father's condition. But the specifics of his physical state were not, at that point, the primary determinants of whether this would be a good day or a challenging one. More important to our family, especially my mother, was who would be taking care of my father that day.

The expression on my mother's face acted much like the other blinking and beeping monitors in the room. In this case, it measured the tension in the room, with a scale ranging from "calm/reassured" to "tense/unbearable." Too many years have passed for me to remember their names, but their faces and the way they provided care are indelibly etched in my memory. When one nurse in particular walked into the room, my mother's facial stress meter would visibly register "calm and reassuring." Regardless of how critical my father's physical condition might be, we knew we could cope with virtually any news and get through the day successfully.

Not only did she carefully and calmly explain everything she was doing to help my dad, but she thoughtfully attempted to clarify and elaborate on the actions of other members of the care team who had not been quite so clear.

Most importantly, her words and actions were expressed in light of the questions and fears she carefully observed on the faces of my family. She watched. She listened. She interpreted. Then she spoke.

Alternatively, a different nurse could walk into the room and the tension would rise palpably. It was if my mother's facial expression was going to begin flashing warning signals just like the monitors and IVAC pumps hooked up to my father's failing body.

So what accounted for the dramatic difference in our experience? Certainly it was not the clinical expertise of the patient care professionals who cared for my father. Rather, another set of equally important skills defined for our family the quality of the care that would be provided that day.

## **Why Talk about "Communication?"**

Communication. It is one of the most elemental, essential skills we acquire very early in life. Most of us equate the term with talking. Those first few simple utterances – ma-ma ... da-da ... wa-wa – put the basics of life at an 18-month-old's beck and call.

But communication is more complicated than simply uttering words. Even the toddler understands at a basic level that if spoken words do not elicit the desired result, then nothing has been communicated. That predicament is often followed by an outburst of crying designed to produce the food, water or favorite toy that was sought in the first place.

How often do adults react in a similar fashion? While most of us have learned to control our emotions better than the toddler, failure to communicate can result in responses – raised voice, sharp words, scowled brow or the “silent treatment” – that only further inhibit the ability to be understood.

Failure to communicate effectively certainly impacts our personal lives. But the problem of not being understood has equally significant consequences in our professional lives. When you work in health care, the consequences can be disastrous.

In the hospital environment, better communication not only improves relationships with patients, families and colleagues, but can improve the quality and safety of the clinical care we provide. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO), America’s accrediting organization for hospitals, tracks the root causes for significant mistakes and dangerous events in hospitals. Termed “sentinel” events, these occurrences cause, or have the potential to cause, significant harm or death to patients. During the past eight years, “communication” has been ranked as the leading reason for these all-too-often tragic events in hospitals across the U.S. Over 70 percent of all sentinel events have been found to involve lack of communication or miscommunication as a factor in their cause.

While patient safety alone offers overwhelming rationale for improving communication effectiveness, there are other compelling reasons as well. How much time and how many dollars are wasted within hospitals because of misunderstandings and the need for rework? Given the extreme financial pressures facing all health care providers, no one can afford to divert scarce resources needed for patient care and staff support to correcting mistakes that should have never happened in the first place.

A misplaced order or misunderstood request. Incomplete prep instructions that cause a delay in therapy. Imprecise directions or documentation that cause a diagnostic test to be performed a second time. Miscommunication is epidemic in most hospitals. In focus groups I have conducted with front-line hospital staff, it was remarkable how many people could quickly cite a communication error *within the past few days* that affected productivity. Fortunately, these errors were corrected before they affected a patient’s care. But the fact that errors like these have to be dealt with at all causes frustration and extra effort to correct the mistake or oversight.

Most health care professionals would agree that their careers provide intrinsic rewards derived primarily from a focus on helping people. That said, working in a hospital still can be exceptionally stressful because of the nature of the work and emotional toll it can extract. Relationships with our colleagues can either add to or reduce that level of stress. And how we communicate with one another is the primary determinant of the quality of those relationships.

As employees in hospitals know all too well, today there is a significant and worsening shortage of talented, caring health care professionals to provide both the quality and quantity of care required by our aging population. Creating an environment that supports and nurtures staff is, of course, somewhat dependent on hospital policies. But our internal culture also is shaped by the way we communicate with each other, the relationships we build and the support we provide to our colleagues. With retention of superb employees at the top of every hospital’s list of priorities, communication among staff is indeed one of the critical issues deserving attention.

As a hospital staff member, it is easy to believe that solving the problem of staff retention belongs only to senior management. But in many

hospitals, new nursing graduates report that the way experienced staff members treat them significantly influences their decision to stay or pursue a job elsewhere. A revolving door of young professionals creates both immediate and long-term problems for the patient care team: today's positions remain vacant or get filled by temporary staff, while development of the next generation of experienced nurses and other clinical professionals becomes more and more distant and elusive.

Finally, and perhaps most compellingly, everyone on the health care team strives for patient care to be of the utmost quality and most curative for the patient and family. Countless studies document the miraculous influence of attitude and state of mind on a patient's recovery ~ both physically and emotionally.

In numerous published studies, as well as in my own focus group research conducted with patients and their families, people consistently cited the importance of being acknowledged and treated as individuals – human beings with hopes, fears, unique characteristics and special qualities – during their hospital stays. How often does the way we communicate with a patient affect her state of mind, outlook and ultimate recovery? Unfortunately, all too often patients feel as if they must check their dignity at the door when they enter a hospital – a place that can be foreign, frightening, unsettling and, at times, even demoralizing.

Improving patient satisfaction can have positive benefits for more than just the patients. From a caregiver's point of view, don't interactions and interventions that truly touch a patient's life provide the greatest sense of personal accomplishment and reward? Think about those patients and situations that have been most influential, rewarding or memorable. Did a specific clinical procedure that you handled with particular skill come to mind? Unless you

are a research scientist who pioneered a breakthrough drug or revolutionary treatment approach, you likely thought of a particular patient or family whose life was touched at a crucial point in time by your care. Improving the way *all* staff communicate with patients and with each other has the potential to incrementally transform the care environment and positively influence patients' recovery.

In any work setting, the ability to develop strong, effective relationships with peers, subordinates and superiors is usually a key determinant of individual success and job satisfaction. Certainly one must possess technical know-how, but it is seldom an individual's technical expertise alone that leads us to describe her as a great coworker. In fact, it is often through superior communication skills that a coworker's technical excellence becomes most evident. Strong technicians who are also strong communicators are usually tapped to become teachers and mentors in hospital departments.

But the personal benefits of improved communication go far beyond just the satisfaction of a job well done. Especially in today's society, our personal and professional lives are intertwined in a way where success and happiness at home affects success and happiness at work – and vice versa.

Think about the factors that influence your personal happiness. After you get beyond life's basics that are found that the bottom of psychologist Abraham Maslow's well-known "Hierarchy of Needs" pyramid – food, shelter and safety – it is likely you thought of the influence other people in your life have on your level of happiness.

Of course, the mere existence of others in our everyday lives has little to do with how they influence our happiness. Rather, it is our emotional and psychological relationships with others that really define whether they are net

contributors to our health and happiness or a drain on our energy and psyche.

When we look at the factors that define relationships with others, communication certainly must be at the top the list. Even when the circumstances surrounding our relationship with another person are exceptionally difficult, sad or challenging, the way we communicate with each other usually determines whether interactions have a positive or negative impact.

An example that is familiar to most health care professionals illustrates this point. Family members of a loved-one struggling with terminal illness are put in one of the most emotionally charged and challenging situations of their lives. These sad, stressful circumstances test relationships in a way that few other events do. In these situations, effective communication is the glue that helps hold families together and can actually strengthen relationships in spite of the trying conditions. Or, in many unfortunate cases, lack of communication is the wedge that drives individuals apart when they need one another most.

“I just don’t know what to say....” This seemingly simple, innocuous phrase expressed by friends or family members of a dying patient underlies a far more serious issue than the words express: it is not that people don’t know what to say, but rather that they don’t know how to communicate. The fact that many start with concern about what to say underlines one of the first and often primary problems in ineffective communication: an inability, disinterest or unwillingness to *listen*.

Clearly, the ability to communicate well with the people in our lives – those at work and those at home ... those we seek out and those we simply tolerate ... those we teach and those who teach us ... those we love and even those we despise – becomes a primary determinant of our personal and professional success, satisfaction and

happiness. Spending time to better understand how we can improve our communication effectiveness is a long-term investment in a skill that touches every aspect of our lives.

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## About the Author

Burl Stamp, FACHE, is the founder and president of Stamp & Chase, Inc., a health care consulting firm based in St. Louis, Missouri. The firm works with health care provider organizations nationwide to improve patient care by improving communication.

Burl’s 20+ year career in health care has included positions in community hospitals, academic medical centers, integrated health systems and children’s hospitals. As president & CEO of Phoenix Children’s Hospital, he spearheaded the effort to build the first freestanding, acute care pediatric facility in Arizona.

In addition to consulting, Stamp & Chase’s portfolio of services includes *Caremunication™*, a comprehensive program designed to help health care organizations improve the communication practices and effectiveness of front-line staff.

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